



**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 13, 2006 08:00 AM
Secretary of State

DOCUMENT # P97000016627		
1. Entity Name JDC ENTERPRISES, INC.		
Principal Place of Business 3725 S. OCEAN DRIVE SUITE 718 HOLLYWOOD, FL 33019	Mailing Address 3725 S. OCEAN DRIVE SUITE 718 HOLLYWOOD, FL 33019	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent HEIDT, MICHAEL ESQ. 4000 HOLLYWOOD BLVD. SUITE 735 SOUTH HOLLYWOOD, FL 33021		DO NOT WRITE IN THIS SPACE
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reconstituting)</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD COWAN, JONATHAN 3725 S. OCEAN DR., SUITE 718 HOLLYWOOD, FL 33019	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD COWAN, IRVING 3725 S. OCEAN DR., SUITE 718 HOLLYWOOD, FL 33019	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		3/7/06 954 458 8998 <small>Date Daytime Phone #</small>



01242006 No Chg-P CRZE034 (11/05)

4. FEI Number 65-0731653	Applied For Not Applicable
5. Certificate of Status Desired  \$8.75 Additional Fee Required	

000000466369
03/23/06 00007-024 158.75