

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000025915

Entity Name: JAXBO, INC.

FILED  
Mar 22, 2005  
Secretary of State

## Current Principal Place of Business:

6721-6731 STUART AVE  
JACKSONVILLE, FL 32254 US

## New Principal Place of Business:

## Current Mailing Address:

41 N FT HARRISON AVE  
CLEARWATER, FL 34615

## New Mailing Address:

2140 DREW ST., UNIT Q  
CLEARWATER, FL 33765

FEI Number: 59-3438370

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BONNER, HEIKO  
41 N FT HARRISON AVE  
CLEARWATER, FL 33755 US

## Name and Address of New Registered Agent:

BONNER, HEIKO  
2140 DREW ST., UNIT Q  
CLEARWATER, FL 33765 US

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

03/22/2005

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VP ( ) Delete  
Name: OELKERS, ARNDT  
Address: WAELDELE ST R. 16  
City-St-Zip: HIRSCHEGG, AU

Title: P ( ) Delete  
Name: BONNER, HEIKO  
Address: 41 N FT HARRISON AVE  
City-St-Zip: CLEARWATER, FL 33755

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P (X) Change ( ) Addition  
Name: BONNER, HEIKO  
Address: 2140 DREW ST., UNIT Q  
City-St-Zip: CLEARWATER, FL 33765

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HEIKO BONNER

Electronic Signature of Signing Officer or Director

P

03/22/2005

Date