

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2004 8:00 am
Secretary of State

01-12-2004 90014 005 ***150.00

DOCUMENT # P97000064729 1. Entity Name J & D INTERNATIONAL HOLDINGS, INC.			
Principal Place of Business 13627 DEERING BAY DRIVE STE 704 CORAL GABLES, FL 33158		Mailing Address 13627 DEERING BAY DRIVE STE 704 CORAL GABLES, FL 33158	
2. Principal Place of Business 13627 Deering Bay Drive Suite, Apt. #, etc. Suite 704		3. Mailing Address 13627 Deering Bay Drive Suite, Apt. #, etc. Suite 704	
City & State Coral Gables, FL		City & State Coral Gables, FL	
Zip 33158		Zip 33158	
4. FEI Number 65-0771915		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SANDERS, DOUGLAS J 13627 DEERING BAY DRIVE STE 704 CORAL GABLES, FL 33158		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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: <u><i>Douglas J. Sanders</i></u> Douglas J. Sanders, Secretary <u>1/6/04</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BLAYA, JOAQUIN 13645 DEERING BAY DRIVE APT. 133 MIAMI, FL 33158D	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP Blaya, Joaquin 13658 Deering Bay Drive Coral Gables, FL 33158
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST SANDERS, DOUGLAS J 13627 DEERING BAY DRIVE STE 704 CORLA GABLES, FL 33158	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Coral Gables, FL 33158
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete
12. I hereby certify that the information supplied with this filing does not qualify 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 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: <u><i>Douglas J. Sanders</i></u> Douglas J. Sanders <u>1/6/04</u> (305) 232-0524 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>			