2005 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Jan 12, 2005 08:00 AM **Secretary of State** DOCUMENT # P97000064729 J & D INTERNATIONAL HOLDINGS, INC. Mailing Address Principal Place of Business 13627 DEERING BAY DRIVE STE 704 13627 DEERING BAY DRIVE STE 704 CORAL GABLES, FL 33158 CORAL GABLES, FL 33158 01072005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0771915 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent SANDERS, DOUGLAS J DO NOT WRITE 13627 DEERING BAY DRIVE STE 704 STE 704 IN THIS SPACE CORAL GABLES, FL 33158 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. DATE Signature, typed of printed name of registered egent and title if applicable (NOTE Registered Agent Signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 10. OFFICERS AND DIRECTORS DP TITLE NAME BLAYA, JOAQUIN STREET ADDRESS 13658 DEBRING BAY DRIVE U00000178513 CITY - ST-ZIP MIAMI, FL 33158D 01/12/05-80031-019 150.00 DST TITLE SANDERS, DOUGLAS J NAME STREET ADDRESS 13627 DEERING BAY DRIVE STE 704 CORLA GABLES, FL 33158 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. Thereby 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:

TITLE NAME. STREET ADDRESS CITY - ST-ZIP

AND TYPE

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/6/2005

232-0524