

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000069012

Entity Name: G & E OF JAX, INC.

FILED
Mar 22, 2004
Secretary of State

Current Principal Place of Business:

8789 SAN JOSE BLVD.
212
JACKSONVILLE, FL 32217

New Principal Place of Business:

Current Mailing Address:

8809 BAYMEADOWS ROAD
JACKSONVILLE, FL 322567427

New Mailing Address:

P.O. BOX 5490
ST MARYS, GA 31558

FEI Number: 59-3462178

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROTHSTEIN, SIMON D
4417 BEACH BLVD., STE. 104
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

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

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: NAMMOUR, NAMMOUR
Address: 8789 SAN JOSE BLVD.
City-St-Zip: JACKSONVILLE, FL 32217

Title: DV () Delete
Name: ANTAR, NICHOLAS
Address: 8789 SAN JOSE BLVD.
City-St-Zip: JACKSONVILLE, FL 32217

Title: T () Delete
Name: ANTAR, ROBERT
Address: 8789 SAN JOSE BLVD.
City-St-Zip: JACKSONVILLE, FL 32217

Title: S () Delete
Name: NAMMOUR, CAMELL
Address: 8789 SAN JOSE BLVD.
City-St-Zip: JACKSONVILLE, FL 32217

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: NAMMOUR, NAMMOUR
Address: P.O. BOX 56253
City-St-Zip: JACKSONVILLE, FL 32241

Title: DV (X) Change () Addition
Name: ANTAR, NICHOLAS
Address: P.O. BOX 56253
City-St-Zip: JACKSONVILLE, FL 32241

Title: T (X) Change () Addition
Name: ANTAR, ROBERT
Address: P.O. BOX 56253
City-St-Zip: JACKSONVILLE, FL 32241

Title: S (X) Change () Addition
Name: NAMMOUR, CAMELL
Address: P.O. BOX 56253
City-St-Zip: JACKSONVILLE, FL 32241

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: NAMMOUR NAMMOUR

DP

03/22/2004

Electronic Signature of Signing Officer or Director

Date