

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000084028

FILED  
Feb 09, 2006  
Secretary of State

Entity Name: JOINT TECHNOLOGY ENGINEERING INC.

## Current Principal Place of Business:

103B GEORGIA AVE  
NICEVILLE, FL 32578

## New Principal Place of Business:

## Current Mailing Address:

1114 JOHN SIMS PKWY  
#143  
NICEVILLE, FL 32578

## New Mailing Address:

FEI Number: 59-3471572      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LAROUX, PAUL R  
P.O. BOX 1092  
NICEVILLE, FL 32578      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: PSD ( ) Delete  
Name: PAUL R LAROUX,  
Address: P.O. BOX 1092  
City-St-Zip: NICEVILLE, FL 32578

Title: VTD ( ) Delete  
Name: LAROUX, PHILIP R  
Address: 22 W. DEL RIO DR.  
City-St-Zip: TEMPE, AZ 85282

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: PAUL R. LAROUX

PSD

02/09/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date