2007 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 26, 2007 08:00 AM DOCUMENT # P98000034896 **Secretary of State** JADD GROUP, INC. Principal Place of Business Mailing Address 1 CHANNEL CAY 24 DOCKSIDE LANE KEY LARGO, FL 33037 #508 KEY LARGO, FL 33037 No Chg-P CR2E034 (11/05) 02192007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0827256 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SULLIVAN, JILL P DO NOT WRITE 1 CHANNEL CAY KEY LARGO, FL 33037 IN THIS SPACE 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. (NOTE, Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable U00000646414 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 18 \$150.00 After May 1, 2007 Fee will be \$550.00 03/06/07-80029-014 150.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE SULLIVAN, JILL P NAME STREET ADDRESS 1 CHANNEL CAY KEY LARGO, FL 33037 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

STREET AODRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/20/07

Daytime Phone #

FILED