## 2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

## **FILED** Jan 12, 2007 08:00 AM Secretary of State **DOCUMENT # P98000081691** 1. Entity Name L-JAY GROUP II, INC. Mailing Address Principal Place of Business **4640 SIESTA CIRCLE 4640 SIESTA CIRCLE** FORT MYERS, FL 33901 FORT MYERS, FL 33901 US US CR2E034 (11/05) 01092007 No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0864466 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent JORDAN, JOHN G DO NOT WRITE 4640 SIESTA CIR FORT MYERS, FL 33901 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 Lowa 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. mne JOHNSON, THOMAS D MANJE STREET ADDRESS P.O.BOX 60825 CITY-ST-ZIP FORT MYERS, FL 33906 TITLE 111)00000583819 NAME. 01/12/07-80012-008 150.00 STREET ADDRESS CITY-ST-ZP 7171 E NAME STREET ADDRESS DO NOT WRITE COY-ST-ZP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-57-78 TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this fitting 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 logal 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

Device Phone #