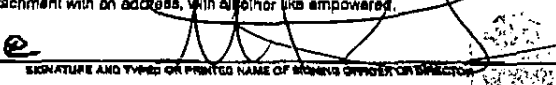


2008 FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2008 08:00 A
Secretary of State

DOCUMENT # P98000086231			
1. Entity Name JAYVEE CORP.			
Principal Place of Business 11911 US 27 SOUTH SEBRING, FL 33870		Mailing Address 11911 US 27 SOUTH SEBRING, FL 33870	
DO NOT WRITE IN THIS SPACE		01212008 No Chg-P CR2E0G4 (11/05)	
		4. FEI Number 66-0868631 <table border="1"> <tr> <td>Applied For</td> <td>Not Applicable</td> </tr> </table>	
Applied For	Not Applicable		
6. Name and Address of Current Registered Agent PATEL, VIJAY M 11911 US 27 SOUTH SEBRING, FL 33870		DO NOT WRITE IN THIS SPACE 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
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 _____ (Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when attaching)) DATE _____			
FILE NOW!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fee	
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE 000000794840 01/28/08-80023-018 150.00	
TITLE	D		
NAME	PATEL, VIJAY M		
STREET ADDRESS	11911 US 27 SOUTH		
CITY-ST-ZIP	SEBRING, FL 33870		
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
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: 		Date: 01/24/08 Daytime Phone: 883-552977	