

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000028043

1. Entity Name
JT JAMZ, INC.



Principal Place of Business
3408 W BROWARD BLVD.
FORT LAUDERDALE, FL 33311

Mailing Address
3408 W BROWARD BLVD.
FORT LAUDERDALE, FL 33311

FILED

04 MAY 26 AM 10:59

SECRETARY OF STATE
05-03104 0/052 028 0/50.00



DO NOT WRITE IN THIS SPACE

01132004 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0909649

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CALDWELL, TASHAANA
3408 W BROWARD BLVD
FORT LAUDERDALE, FL 33312

**DO NOT WRITE
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

Tashaana Caldwell
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

5/24/04
DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution: ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	ADDERLY, JACOB
STREET ADDRESS	3408 W BROWARD BLVD.
CITY-ST-ZIP	FORT LAUDERDALE, FL 33311
TITLE	V
NAME	CALDWELL, TASHAANA
STREET ADDRESS	3408 W BROWARD BLVD
CITY-ST-ZIP	FORT LAUDERDALE, FL 33311
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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

Tashaana Caldwell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/24/04 964 485-0774
Date Daytime Phone #