2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 03, 2007 08:00 A Secretary of State **DOCUMENT # P99000047889** 1. Entity Name EDWARD JEFFRIES, INC. Principal Place of Business Mailing Address 4424 N LOIS AVE 4424 N LOIS AVE TAMPA, FL 33614 TAMPA, FL 33614 04272007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3577125 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent JEFFRIES, EDWARD E DO NOT WRITE 10226 N. VALLE DR. TAMPA, FL 33612 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) 9. Election Campaign Financing \$5.00 May Be 05/24/07-80047-011 150.00 FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Added to Fees Trust Fund Contribution. OFFICERS AND DIRECTORS 10. JEFFRIES, EDWARD E NAME STREET ADDRESS 10226 N. VALLE DR. TAMPA, FL 33609 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE" NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS 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 attachujent with an address, with all other like empowered.

Edward.