


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90178 023 ***158.75

DOCUMENT # P99000085971 1. Entity Name JB SOFT CONSULTING, INC.	
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Principal Place of Business 658 LAKE BOULEVARD WESTON, FL 33326	Mailing Address 658 LAKE BOULEVARD WESTON, FL 33326
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DO NOT WRITE IN THIS SPACE



01132004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0944161	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BRAND, J. MAURICE 19643 N.W. 87TH COURT HIALEAH, FL 33018
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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.

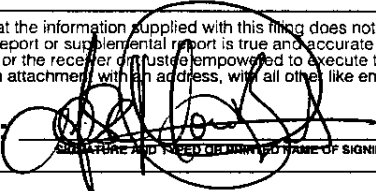
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO BEMMAN, WALTER JOHN II 658 LAKE BLVD WESTON, FL 33326
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CTO BRAND, J. MAURICE 19643 NW 87TH CT HIALEAH, FL 33018
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COO GASSETT, JOHN 2720 SE 14TH STREET POMPANO BEACH, FL 33062
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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:  Jose Mauricio Brand 4/28/04 305 778-7319	Date Daytime Phone #
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