


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 04, 2006 8:00 am**  
**Secretary of State**

05-04-2006 90210 042 \*\*\*150.00

<b>DOCUMENT # P99000095803</b>	
1. Entity Name <b>JACOBS &amp; MATHEWS, INC.</b>	

2805

Principal Place of Business <b>2807 W BUSCH BLVD SUITE 100 225 TAMPA, FL 33618</b>	Mailing Address <b>2805</b> <b>2807 W BUSCH BLVD SUITE 100 225 TAMPA, FL 33618</b>
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

01112006 Chg-P CR2E034 (11/05)

4. FEI Number <b>65-0962083</b>		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
<b>KOLODNER, ROBERT I 2807 W BUSCH BLVD 2805 SUITE 100 TAMPA, FL 33618</b>		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	FL Zip Code

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 title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PRES KOLODNER, ROBERT I 2807 W BUSCH BLVD 2805 TAMPA, FL 33618</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/06

Date

813 930-6511

Daytime Phone #

ATTACHMENT 40083383

#P99000095-803

**JACOBS & MATHEWS, INC.**

2805 West Busch Boulevard  
Tampa, FL 33618  
Phone: (813) 930-6511  
Fax: (813) 930-9422

May 2, 2006

To Whom It May Concern:

We have recently just realized that we did not receive our annual notice to renew our corporation. I suspect it is because we have moved in December, 2005 to a new office and your notice was not forwarded. Here is our check \$150.00 and our corrected annual report.

Sincerely,



Robert I. Kolodner  
President