


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Apr 14, 2006 08:00 AM
Secretary of State**

DOCUMENT # S00698		
1. Entity Name J.G.C. CORPORATION		
Principal Place of Business 265 S. FEDERAL HWY SUITE #293 DEERFIELD BEACH, FL 33441 US		Mailing Address 265 S. FEDERAL HWY SUITE #293 DEERFIELD BEACH, FL 33441 US
DO NOT WRITE IN THIS SPACE		
03012006 No Chg-P CR2E034 (11/05)		
4. FEI Number 65-0216418		Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent		
CHAROS, JOHN 265 S. FEDERAL HWY #293 DEERFIELD BEACH, FL 33441		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 _____ <small>Signature, typed or printed name of registered agent and title (applicable). (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY ST ZIP	P CHAROS, JOHN 265 S. FEDERAL HWY SUITE #293 DEERFIELD BEACH, FL 33441	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY ST ZIP	VP CHAROS, TERESA 265 S. FEDERAL HWY SUITE #293 DEERFIELD BEACH, FL 33441	
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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 information.		
SIGNATURE: <u><i>Terese Chase</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		4/4/06 Date Daytime Phone #