2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Mar 29, 2007 08:00 Al DOCUMENT # S81111 **Secretary of State** 1. Entity Name J D & COMPANY INC. Principal Place of Business Mailing Address 11330 SW 47 TERR 11330 SW 47 TERR MIAMI, FL 33165 MIAMI, FL 33165 03262007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0302609 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DIAZ, JUAN M DO NOT WRITE 11330 SW 47 TERR MIAMI, FL 33165 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 - Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS PST TITLE DIAZ, JUAN M NAME 11330 SW 47 TERR STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33165 U00000682289 04/04/07-80080-013 150.00 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-78P TITLE STREET ADDRESS CITY-ST-ZIP

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 trustree enjowered 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 any address, with all other like empowered.

SIGNATURE:

URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR