2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 23, 2007 8:00 am DOCUMENT # V38073 Secretary of State 1. Entity Namo 03-23-2007 90026 039 ***150.00 JAD ACRYLICS, INC. Principal Place of Business Mailing Address 3350 NW 22 TERR 3350 NW 22 TERR SUITE 200 B POMPANO BCH FL 33433 SUITE 200 B POMPANO BCH FL 33433 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) 4. FEI Number 65-0346950 City & State City & State Applied For Not Applicable Zip Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent AMY DENKER TANNENBAUM, JANICE Street Address (P.O. Box Number is Not Acceptable) 3350 NW 22 TERR SUITE 200B 3350 NW 22 TERRACE - SUITE 200B POMPANO BCH FL 33069 CITY POMPANO BEACH Zip Code 33069 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. -ARAY DENKER- President FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PRESIDENT AMY DENKER 11542 BIG SRY COURT BOCA RATION FL. 33498 11P NENKER THE PRESIDENT X Change X Delete DILLE Addition TANNENBAUM, JANICE NAME NAME 23351 FEATHER PALM CT. STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33433** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete HILE Change Addition NAME NAME 115 42 BIG SKY COURT STREET ADORESS STREET ADDRESS BOCA RATON | FL 33498 CITY-ST-ZIP CITY+S1-7(P TITLE □ Change Addition ☐ Delete TITLE NAME NAM(-STREET ADDRESS STREET ADDRESS CITY-S1-ZIP CITY-ST-7IP THE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-S1-ZIP ☐ Delete TITLE Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-SI-ZIP THE ☐ Delete THE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-S1-ZIP

12. I heroby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

MU DAV - AMY DENKER

3110/07

FILED

954-977-0445