2004 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Dec 03, 2004
Secretary of State

DOCUMENT# V55063

Entity Name: J-KEDS DIVERSIFIED SERVICES, INC.

Current Principal Place of Business:

550 BURNETT RD
COCOA, FL 32926

New Principal Place of Business:

Current Mailing Address:

2202 MERCER
COCOA, FL 32926

New Mailing Address:

FEI Number: 59-3273823 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JOINER, WILLIE H.
2202 MERCER DR.
COCOA, FL 32926 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: JOINER, WILLIE H.,
Address: 2202 MERCER DR.
City-St-Zip: COCOA, FL

Title: V ( ) Delete
Name: MITCHELL, MARY M
Address: 1514 CLEARLAKE RD. #55
City-St-Zip: COCOA, FL

Title: ST ( ) Delete
Name: JOINER, CHENITA
Address: 2202 MERCER DR.
City-St-Zip: COCOA, FL

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D ( ) Change (X) Addition
Name: JOINER, JAMES P
Address: 889 SPIREA DR.
City-St-Zip: ROCKLEDGE, FL

Title: D ( ) Change (X) Addition
Name: SCOINERS, JOYCE
Address: 990 PINELAND DR.
City-St-Zip: ROCKLEDGE, FL

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOYCE SCOINERS D 12/03/2004

Electronic Signature of Signing Officer or Director — Date