

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P29445

Entity Name: JACKI'S, INC.

FILED
Jul 22, 2004
Secretary of State

Current Principal Place of Business:

129 1/2 N. WOODLAND BLVD.
STE. 5
DELAND, FL 32704269 US

New Principal Place of Business:

2578 ENTERPRISE ROAD
STE. 155
DEBARY, FL 32763 US

Current Mailing Address:

129 1/2 N. WOODLAND BLVD.
STE. 5
DELAND, FL 32704269 US

New Mailing Address:

2578 ENTERPRISE ROAD
STE. 155
DEBARY, FL 32763 US

FEI Number: 59-2998980

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SORENSEN, NEIL A
51 BEACH STREET
PONCE INLET, FL 32127

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SORENSEN, JACKI,
Address: 51 BEACH ST
City-St-Zip: PONCE INLET, FL 32127

Title: CSTD () Delete
Name: SORENSEN, NEIL
Address: 51 BEACH ST
City-St-Zip: PONCE INLET, FL 32127

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: NEIL A. SORENSEN

CSTD

07/22/2004

Electronic Signature of Signing Officer or Director

_____ Date