



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1 - March 1 • Filing Fee: \$50.00*

* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No 130184		2. Name of Corporation JUMP TEC INC.			
3. Street Address Principal Business Office 115 SUFFOLK AVE			City PAWTUCKET	State RI	Zip 02861
4. Business Phone No. 401-640-5941		5. State of Incorporation RI			
6. Brief Description of the Character of Business Conducted in Rhode Island import & export electronic					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name JORGE E ARIAS			Vice President Name		
Street Address 115 SUFFOLK AVE.			Street Address		
City PAWTUCKET	State RI	Zip 02861	City	State	Zip
Secretary Name			Treasurer Name JORGE E ARIAS		
Street Address			Street Address 115 SUFFOLK AVE		
City	State	Zip	City PAWTUCKET	State RI	Zip 02861
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1000	COMMON	NONE	NONE		

RECEIVED
 SECRETARY OF STATE
 CORPORATIONS DIV.
 2006 NOV - 8 PM 12:31

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature: Jorge E Arias Date: _____
 Print or Type Name: JORGE E ARIAS
 Title: PRESIDENT

File Date: **FILED**
 Check No.: **NOV 08 2006**
 By: [Signature]
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1. Corporate ID No. <u>130184</u>		2. Name of Corporation <u>JUMP-TEC INC.</u>			
3. Street Address Principal Business Office <u>115 SUFFOLK TVE.</u>			City <u>PAWTUCKET</u>	State <u>RI</u>	Zip <u>02861</u>
4. Business Phone No. <u>401-640-5941</u>		5. State of Incorporation <u>R.I.</u>			
6. Brief Description of the Character of Business Conducted in Rhode Island <u>Import & export electronic equipment</u>					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name <u>JORGE ARIAS</u>			Vice President Name		
Street Address <u>115 SUFFOLK TVE.</u>			Street Address		
City <u>PAWTUCKET</u>	State <u>RI</u>	Zip <u>02861</u>	City	State	Zip
Secretary Name			Treasurer Name <u>JORGE ARIAS</u>		
Street Address			Street Address <u>115 SUFFOLK AVE.</u>		
City	State	Zip	City <u>PAWTUCKET</u>	State <u>RI</u>	Zip <u>02861</u>
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
<u>1000</u>	<u>COMMON</u>	<u>NONE</u>	<u>NONE</u>		

RECEIVED
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This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

FILED

File Date NOV 08 2006
 Check No. By [Signature]
 By: [Signature]
 FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

[Signature]
 Signature Date
JORGE E ARIAS
 Print or Type Name
PRES
 Title