## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Feb 25, 2008 08:00 AN Secretary of State

ANNUAL REPORT					25, 2000 00.0
DOCUMENT # F39256				S	ecretary of Sta
Entity Name     JOMAR INDUSTRIAL SUPPLIES, INC.					
Principal Place of Business 959 W. 30TH STREET HIALEAH, FL 33012	Mailing Address 959 W. 30TH STREET HIALEAH, FL 33012		 		- 11115 21111 11051 11051 11051 11051 111151 11115
DO NOT WRITE	IN THIS SPA	CE	02192008 N 4. FEI Number 59-210165	lo Chg-P	CR2E034 (11/05)  Applied For Not Applicable  \$8.75 Additional
	· • • • • • • • • • • • • • • • • • • •	1	5. Certificate of Sta	atus Desired	Fee Required
6. Name and Address of Current R  MARTINEZ, JORGE M  959 W 30TH ST  HIALEAH, FL 33012	•			IIS SP	ACE
The above named entity submits this statement for the obligations of registered agent.	the purpose of changing its register	ed office or register	ed agent, or both, in	the State of Flo	orida. I am familiar with, and accept
Signature, typed or printed name of registered agent an	d title if applicable. (NOTE, Registere	d Agent signature required	d when reinstating)		DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.0	9. Election Campaign Final     Trust Fund Contribution.		.00 May Be led to Fees		
10. OFFICERS AND D	PIRECTORS	1			
NAME MARTINEZ, JORGE M STREET ADDRESS CITY-ST-ZIP HIALEAH, FL					
TITLE VD NAME MARTINEZ, GEORGIA STREET ADDRESS CITY-ST-ZIP HIALEAH, FL					
ITILE SD  NAME MARTINEZ, AMPARO E  STREET ADDRESS CITY-ST-ZIP HIALEAH, FL			DO N	OT W	839201 81061-014 150.00 <b>RITE</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN TH	lis sf	PACE
TITLE NAME STREET ADDRESS CITY-ST-7IP					••
TITLE NAME			•	•	. ,

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 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:

STREET ADDRESS CITY-ST-ZIP

Toygo M MARTINEZ

02/19/68 (30) 558-1420 Date Dayline Prone #

PRESidont