2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # G45973

1. Entity Name
JEMAJO CORPORATION



FILED
May 31, 2006 08:00 AM
Secretary of State

Principal Place of Business

2200 SW 16TH ST STE 214 MIAMI, FL 33145 Mailing Address

2200 SW 16TH ST STE 214 MIAMI, FL 33145



05242006

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-2301727

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PEREZ, FELIX J. 2200 S.W. 16 STREET #214 MIAMI, FL 33145

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	named entity submits this statement for the ions of registered agent.	purpose of changing its registere	d office or regis	stered agent, or bo	oth, in the State of Florid	da. I am familiar with, and accep
SIGNATURE_	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Registered	Agent signature requ	rired when reinstating)		DATE
	LE NOW!!! FEE IS \$150.00 ue by September 6, 2006	9. Election Campaign Finan Trust Fund Contribution.		5.00 May Be dded to Fees	In accordance wit corporation did no	th s. 607.193(2)(b), F.S., the of receive the prior notice.
10.	OFFICERS AND DIRE	CTORS	1944	Part Land	神经器内容。而	實際或者等調本報告 5
TITLE NAME STREET ADDRESS CITY-SI-ZIP	PSTD PEREZ, FELIX J. 2200 S.W. 16 STREET #214 MIAMI, FL 33145					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					100000056 05/31/06-80	6401 6401 001-011 158.75
TITLE NAME STREET ADDRESS CITY - ST-ZIP					NOT WI	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		·		İN	THIS SP	ACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP						

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 trusted 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:

NAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-23-06 (305) 858-7701

Daytime Pho