2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 21, 2008
Secretary of State

DOCUMENT# L06000091166

Entity Name: JALOTEAM, LLC

Current Principal Place of Business:

1468 SW 134TH PLACE
MIAMI, FL 331843334 US

New Principal Place of Business:

111 S HOLLYBROOK DR
301
PEMBROKE PINES, FL 33025 US

Current Mailing Address:

1468 SW 134TH PLACE
MIAMI, FL 331843334 US

New Mailing Address:

111 S HOLLYBROOK DRIVE
301
PEMBROKE PINES, FL 33025 US

FEI Number: 76-0847356 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LOPEZ, JANE M
1468 SW 134TH PLACE
MIAMI, FL 331843334 US

Name and Address of New Registered Agent:

LOPEZ, JANE M
111 S HOLLYBROOK DRIVE
301
PEMBROKE PINES, FL 33025 US

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: 04/21/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: LOPEZ, JANE M
Address: 1468 SW 134TH PLACE
City-St-Zip: MIAMI, FL 331843334 US

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

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: LOPEZ, JANE M
Address: 111 S HOLLYBROOK DR #301
City-St-Zip: PEMBROKE PINES, FL 33025 US

Title: MGRM ( ) Change (X) Addition
Name: LOPEZ, ARMANDO
Address: 111 S HOLLYBROOK DR #301
City-St-Zip: PEMBROKE PINES, FL 33025

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ARMANDO LOPEZ MGRM 04/21/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date