2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000114692

Entity Name: G.J.M. INVESTMENTS INC.

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OZHAKANATT, MANURAJ

141 MARIANNA PLACE

GARNER, NC 27529 US

Title:

Name:

Address: City-St-Zip: FILED Feb 13, 2005 Secretary of State

-						
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
	/ 142 ND CT ORIDA, 33186	US		' 142 ND CT ORIDA, FL 33186	US	
Current M	ailing Address:		New Maili	New Mailing Address:		
	10434 SW 142 ND CT MIAMI, FLORIDA, 33186 US			10434 SW 142 ND CT MIAMI, FLORIDA, FL 33186 US		
FEI Number:	41-2112351 FE	El Number Applied For()	FEI Number Not Appl	icable () Certi	ficate of Status Desired ()	
Name and	Address of Curre	ent Registered Agent:	Name and	Name and Address of New Registered Agent:		
12839 NW	JOSE C.P.A. 18 COURT (E PINES, FL 3302	28 US				
	named entity subn e of Florida.	nits this statement for the p	urpose of changing i	ts registered office of	or registered agent, or both,	
SIGNATUR	RE:					
	Electronic S	ignature of Registered Age	ent		Date	
Election Can	npaign Financing Tru	st Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () Dele KOLAM, GEORGE 10304 SW 142 ND 0 MIAMI, FL 33181 US	ст	Title: Name: Address: City-St-Zip:	P (X) Chang KOLAM, GEORGE 10434 SW 142 COUR MIAMI, FL 33181 US	ge () Addition	
Title: Name: Address: City-St-Zip:	VP () Dele KOLAMPALLIKATTE 615 PARKANDER C' RALIEGH, NC 2760	, JOSE T	Title: Name: Address: City-St-Zip:	()Chanថ	ge () Addition	

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: GEORGE KOLAM P 02/13/2005

() Change () Addition