

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000022894

Entity Name: JOMANI INDUSTRIES INC

FILED
Sep 08, 2006
Secretary of State

Current Principal Place of Business:

1000 NW 147 ST
MIAMI, FL 33168

New Principal Place of Business:

Current Mailing Address:

1000 NW 147 ST
MIAMI, FL 33168

New Mailing Address:

FEI Number: 76-0780305

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AVILA, JOSE
1000 NW 147 ST
MIAMI, FL 33168 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: AVILA, JOSE
Address: 1000 NW 147 ST
City-St-Zip: MIAMI, FL 33168

Title: VD () Delete
Name: NUNEZ, CARL
Address: 1000 NW 147 ST.
City-St-Zip: MIAMI, FL 33168

Title: SD () Delete
Name: BARROW, ZOILA
Address: 1000 NW 147 ST.
City-St-Zip: MIAMI, FL 33168

Title: TD () Delete
Name: AVILA, KIMANI
Address: 1000 NW 147 ST.
City-St-Zip: MIAMI, FL 33168

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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.

SIGNATURE: JOSE AVILA

PD

09/08/2006

Electronic Signature of Signing Officer or Director

_____ Date