

**2015 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A05000000390

**Entity Name:** JM & IM FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

419 CACTUS DRIVE  
KEY WEST, FL 33040

**Current Mailing Address:**

419 CACTUS DRIVE  
KEY WEST, FL 33040

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GASTESI, RAUL JR  
8105 N.W. 155TH STREET  
MIAMI LAKES, FL 33016 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**General Partner Detail :**

Document # L05000016449  
Name MAQUEIRA, LLC  
Address 419 CACTUS DRIVE  
City-State-Zip: KEY WEST FL 33040

*I hereby 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 a general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: ROBIN MAQUEIRA**

**OPERATING MGR**

**04/26/2015**

\_\_\_\_\_  
Electronic Signature of Signing General Partner Detail

\_\_\_\_\_  
Date