

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000101428

**Entity Name:** JMZ MANAGEMENT SERVICES INC

**Current Principal Place of Business:**

56434 WATER OAK RD  
ASTOR, FL 32102

**Current Mailing Address:**

PO BOX 91-5102  
WEKIVA SPRINGS, FL 32791 US

**FEI Number:** 47-2613051

**Certificate of Status Desired:** No

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

ROBERTS, JAMES  
56434 WATER OAK RD  
ASTOR, FL 32102 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:** JAMES ROBERTS

04/07/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name ROBERTS, JAMES  
Address PO BOX 91-5102  
City-State-Zip: WEKIVA SPRINGS FL 32791

*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 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 all other like empowered.*

**SIGNATURE:** JAMES ROBERTS

P

04/07/2017

Electronic Signature of Signing Officer/Director Detail

Date