

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000006043

Entity Name: JLM HOLDINGS, INC.

FILED  
Apr 29, 2009  
Secretary of State

## Current Principal Place of Business:

6450 W. 21 COURT  
SUITE 205  
HIALEAH, FL 33016

## New Principal Place of Business:

## Current Mailing Address:

6450 W. 21 COURT  
SUITE 205  
HIALEAH, FL 33016

## New Mailing Address:

FEI Number: 51-0393946

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VICTORES, LORENZO  
6450 W. 21 COURT SUITE 205  
HIALEAH, FL 33016 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: VICTORES, LORENZO  
Address: 6450N W. 21 COURT, SUITE 205  
City-St-Zip: HIALEAH, FL 33016

Title: VSD ( ) Delete  
Name: VICTORES, BARBARA  
Address: 6450 W. 21 COURT SUITE 205  
City-St-Zip: HIALEAH, FL 33016

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: BARBARA VICTORES

VSD

04/29/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date