

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000025934

Entity Name: JMVEST, LLC

FILED  
Feb 26, 2004  
Secretary of State

**Current Principal Place of Business:**

2588 SW 27TH AVE  
MIAMI, FL 33133

**New Principal Place of Business:**

**Current Mailing Address:**

2588 SW 27TH AVE  
MIAMI, FL 33133

**New Mailing Address:**

FEI Number: 13-4214635

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

A & E GARCIA, P.A.  
2588 SW 27TH AVE  
MIAMI, FL 33133 US

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

CONSULTING SERVICES OF SOUTH FLORIDA, INC.  
2588 SW 27TH AVE  
MIAMI, FL 33133 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: ANTONIO GARCIA

02/26/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: SOLANO MANAGEMENT CO, RP.  
Address: R.G. HODGE PLAZA 2ND FL, WICKHAMS CAY UPPE  
City-St-Zip: ROADTOWN, TORTOLA, BVI,

Title: MGRM ( ) Delete  
Name: CASTRILLON VARELA, N, YDIA P  
Address: CALLE 6, #25-330, EDIF. AROMAS  
City-St-Zip: MEDELLIN, COLOMBIA,

**ADDITIONS/CHANGES:**

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 Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: NYDIA P. CASTRILLON

MGRM

02/26/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date