2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 11, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000015359

1. Entity Name
J.M.T. L.L.C.

Principal Place of Business	Mailing Address
10354 OSPREY TRACE WEST PALM BEACH, FL 33412 US	10354 OSPREY TRACE WEST PALM BEACH, FL 33412 US

DO NOT WRITE IN THIS SPACE

05092007No Chg-LLC CR2E083 (11/05)

4. FEI Number
20-2341304

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

UNITED STATES CORPORATION AGENTS, INC.
1111 LINCOLN RD
SUITE 400
MIAMI BEACH, FL 33139

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by September 14, 2007

U00000768428
07/12/07-80011-016 55.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	CHOYNOWSKI, JOHN F
STREET ADDRESS	10354 OSPREY TRACE
CITY-ST-ZIP	WEST PALM BEACH, FL 33412
TITLE	MGRM
NAME	CHOYNOWSKI, MARIE E
STREET ADDRESS	10354 OSPREY TRACE
CITY-ST-ZIP	WEST PALM BEACH, FL 33412
TITLE	MGRM
NAME	CHOYNOWSKI, TYLER J
STREET ADDRESS	10354 OSPREY TRACE
CITY-ST-ZIP	WEST PALM BEACH, FL 33412
TITLE	MGRM
NAME	CONTINI, GAETANO
STREET ADDRESS	5723 HIGHFLYER ROAD SOUTH
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418
TITLE	MGRM
NAME	CONTINI, GIOVANNI
STREET ADDRESS	5723 HIGHFLYER ROAD SOUTH
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418
TITLE	MGRM
NAME	CONTINI, MICHAELLA
STREET ADDRESS	5723 HIGHFLYER ROAD SOUTH
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: John F. Choynowski 7/2/07 7327782811
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #