

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000047724

Entity Name: JUMIVA COMPANY, LLC

FILED
Apr 26, 2008
Secretary of State

Current Principal Place of Business:

3818 QUARTZ ST.
PANAMA CITY, FL 32408

New Principal Place of Business:

6319 SUNSET AVE
PANAMA CITY, FL 32408

Current Mailing Address:

3818 QUARTZ ST.
PANAMA CITY, FL 32408

New Mailing Address:

6319 SUNSET AVE
PANAMA CITY, FL 32408

FEI Number: 11-3780662

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VAZQUEZ, JUAN
3818 QUARTZ ST.
PANAMA CITY, FL 32408 US

Name and Address of New Registered Agent:

VAZQUEZ, JUAN
6319 SUNSET AVE
PANAMA CITY, FL 32408 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:

04/26/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: VAZQUEZ, JUAN
Address: 3818 QUARTZ ST.
City-St-Zip: PANAMA CITY, FL 32408

Title: MGRM () Delete
Name: VAZQUEZ, LAURA P
Address: 3818 QUARTZ ST.
City-St-Zip: PANAMA CITY, FL 32408

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: VAZQUEZ, JUAN
Address: 6319 SUNSET AVE
City-St-Zip: PANAMA CITY, FL 32408

Title: MGRM (X) Change () Addition
Name: VAZQUEZ, LAURA P
Address: 6319 SUNSET AVE
City-St-Zip: PANAMA CITY, FL 32408

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 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: JUAN MIGUEL VAZQUEZ

MGRM

04/26/2008

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