

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000099571

FILED
May 06, 2009
Secretary of State

Entity Name: JACOMA LLC

Current Principal Place of Business:

4142 SW 148TH PATH
MIAMI, FL 33185

New Principal Place of Business:

4631 SW 154 PL
MIAMI, FL 33185

Current Mailing Address:

4142 SW 148TH PATH
MIAMI, FL 33185

New Mailing Address:

4631 SW 154 PL
MIAMI, FL 33185

FEI Number: 87-0784721 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

FERNANDEZ, MARIA C
4631 SW 154 PLACE
MIAMI, FL 33185 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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: FERNANDEZ, JAQUELINE
Address: 4142 SW 148TH PATH
City-St-Zip: MIAMI, FL 33185

Title: MGR () Delete
Name: FERNANDEZ, CARLOS
Address: 4142 SW 148TH PATH
City-St-Zip: MIAMI, FL 33185

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: FERNANDEZ, JAQUELINE
Address: 4631 SW 154 PL
City-St-Zip: MIAMI, FL 33185

Title: MGR (X) Change () Addition
Name: FERNANDEZ, CARLOS
Address: 4631 SW 154 PL
City-St-Zip: MIAMI, FL 33185

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: JAQUELINE FERNANDEZ

MGR

05/06/2009

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