

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000017627

FILED
Apr 29, 2009
Secretary of State

Entity Name: JM CONSTRUCTION SERVICES, LLC

Current Principal Place of Business:

10011 W. OKEECHOBEE ROAD #101
HIALEAH GARDENS, FL 33016

New Principal Place of Business:

10011 W. OKEECHOBEE ROAD
APT. 101
HIALEAH GARDENS, FL 33016

Current Mailing Address:

10011 W. OKEECHOBEE ROAD #101
HIALEAH GARDENS, FL 33016

New Mailing Address:

10011 W. OKEECHOBEE ROAD
APT. 101
HIALEAH GARDENS, FL 33016

FEI Number: 20-8504874

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OCAMPO, JUAN
10011 W. OKEECHOBEE ROAD #101
HIALEAH GARDENS, FL 33016 US

Name and Address of New Registered Agent:

OCAMPO, JUAN
10011 W. OKEECHOBEE ROAD
APT 101
HIALEAH GARDENS, FL 33016 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:

04/29/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: OCAMPO, JUAN
Address: 10011 W. OKEECHOBEE ROAD #101
City-St-Zip: HIALEAH GARDENS, FL 33016

Title: MGR () Delete
Name: OCAMPO, MARTHA
Address: 10011 W. OKEECHOBEE ROAD #101
City-St-Zip: HIALEAH GARDENS, FL 33016

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 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 OCAMPO

MGR

04/29/2009

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