2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# L07000106212

Entity Name: JDM'S GROUP ASSOCIATES LLC

Current Principal Place of Business:

232 HAVELOCK ST.
ORLANDO, FL 32824

New Principal Place of Business:

Current Mailing Address:

232 HAVELOCK ST.
ORLANDO, FL 32824

New Mailing Address:

FEI Number: 42-1743410 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ARBELAEZ, MARIA A
11807 SIR WINSTON WAY
ORLANDO, FL 32824 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: ARBELAEZ, MARCELA
Address: 11807 SIR WINSTON WAY
City-St-Zip: ORLANDO, FL 32824

Title: MGR ( ) Delete
Name: ARBELAEZ, MARIA A
Address: 11807 SIR WINSTON WAY
City-St-Zip: ORLANDO, FL 32824

Title: MGR (X) Delete
Name: ARBELAEZ, JUAN E
Address: 11807 SIR WINSTON WAY
City-St-Zip: ORLANDO, FL 32824

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: ARBELAEZ, MARCELA
Address: 232 HAVELOCK ST
City-St-Zip: ORLANDO, FL 32824

Title: MGR (X) Change ( ) Addition
Name: ARBELAEZ, MARIA A
Address: 232 HAVELOCK ST
City-St-Zip: ORLANDO, FL 32824

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: MARIA ARBELAEZ MGR 04/30/2008

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