

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000116421

Entity Name: JFM TOOLS SUPPLY, LLC

FILED
Aug 26, 2008
Secretary of State

Current Principal Place of Business:

3800 NW 110 AVENUE
APT. A
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

3800 NW 110 AVENUE
APT. A
CORAL SPRINGS, FL 33065

New Mailing Address:

FEI Number: 26-1313541 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

MONTOLO, JOSE
3800 NW 110 AVENUE
APT. A
CORAL SPRINGS, FL 33065 US

Name and Address of New Registered Agent:

SUNSHINE TAX AND ACCOUNTING, LLC
P. O. BOX 170386
MIAMI, FL 33017 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: SUNSHINE TAX AND ACCOUNTING, LLC

08/26/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MONTOLIO, JOSE
Address: 3800 NW 110 AVENUE, APT A
City-St-Zip: CORAL SPRINGS, FL 33065

Title: MGR () Delete
Name: MARTE, DIONY EDITH
Address: 3800 NW 110 AVENUE, APT A
City-St-Zip: CORAL SPRINGS, FL 33065

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: JOSE MONTOLIO

MGR

08/26/2008

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