

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L24256

Entity Name: J & G OF MIAMI, INC.

FILED
Jan 12, 2005
Secretary of State

Current Principal Place of Business:

4205 PONCE DE LEON
C/O OSWALDO JARAMILLO
CORAL GABLES, FL 33146 US

New Principal Place of Business:

Current Mailing Address:

4205 PONCE DE LEON
C/O OSWALDO JARAMILLO
CORAL GABLES, FL 33146 US

New Mailing Address:

FEI Number: 65-0153583

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OSWALDO JARAMILLO
4205 PONCE DE LEON BLVD.
CORAL GABLES, FL 33146 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: JARAMILLO, OSWALDO,
Address: 4205 PONCE DE LEON BLVD
City-St-Zip: CORAL GABLES, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: JARAMILLO, OSWALDO,
Address: 4205 PONCE DE LEON BLVD
City-St-Zip: CORAL GABLES, FL 33146

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: OSWALDO JARAMILLO

PSD

01/12/2005

Electronic Signature of Signing Officer or Director

_____ Date