
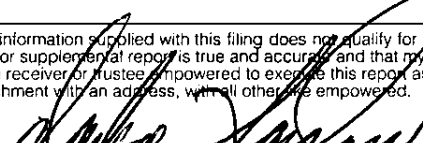


FILED
Apr 27, 2007 8:00 am
Secretary of State

<h1 style="margin: 0;">DOCUMENT # L77904</h1> <p>1. Entity Name J.M. 380 CORPORATION</p>																																																																																																										
Principal Place of Business 120 COCONUT KEY LANE DELRAY BEACH, FL 33484 US		Mailing Address 120 COCONUT KEY LANE DELRAY BEACH, FL 33484 US																																																																																																								
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country																																																																																																								
6. Name and Address of Current Registered Agent <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td rowspan="4" style="width: 80%; vertical-align: top;"> SARDOSS, JIVKO J 120 COCONUT KEY LANE DELRAY BEACH, FL 33484 </td> <td style="width: 20%; text-align: center;">Name</td> </tr> <tr> <td style="text-align: center;">Street Address</td> </tr> <tr> <td style="text-align: center;">City</td> </tr> <tr> <td style="text-align: center;">State</td> </tr> </table>			SARDOSS, JIVKO J 120 COCONUT KEY LANE DELRAY BEACH, FL 33484	Name	Street Address	City	State																																																																																																			
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent. SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required)</small>																																																																																																										
<p style="text-align: center; font-weight: bold;">FILE NOW!!! FEE IS \$150.00</p> <p style="text-align: center; font-weight: bold;">After May 1, 2007 Fee will be \$550.00</p>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5 Ad																																																																																																								
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained indicated on this report or supplemental report is true and accurate and that my signature shall have the effect of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 605, F.S., changed, or on an attachment with an address, with all other duly empowered. <div style="text-align: center; margin-top: 20px;">  </div>																																																																																																										
<p>SIGNATURE: _____</p> <p style="text-align: center; font-size: small;">SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</p>																																																																																																										