

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000004037

Entity Name: J.M. CAPITAL GROUP LLC

FILED  
Jan 28, 2008  
Secretary of State

## Current Principal Place of Business:

500 NORTH BROADWAY STE 1Y6  
JERICO, NY 11753

## New Principal Place of Business:

229 7TH STREET  
SUITE 205  
GARDEN CITY, NY 11530

## Current Mailing Address:

500 NORTH BROADWAY STE 1Y6  
JERICO, NY 11753

## New Mailing Address:

229 7TH STREET  
SUITE 205  
GARDEN CITY, NY 11530

FEI Number: 20-4558408

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

INCRP SERVICE INC  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33420 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: ASCH, JONATHON  
Address: 500 NORTH BROADWAY STE 1Y6  
City-St-Zip: JERICO, NY 11753

Title: MGR ( ) Delete  
Name: GROSS, MICHAEL  
Address: 500 NORTH BROADWAY STE 1Y6  
City-St-Zip: JERICO, NY 11753

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: ASCH, JONATHAN  
Address: 229 7TH STREET  
City-St-Zip: GARDEN CITY, NY 11530

Title: MGR (X) Change ( ) Addition  
Name: GROSS, MICHAEL  
Address: 227 7TH STREET  
City-St-Zip: GARDEN CITY, NY 11530

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: JONATHAN ASCH

MAN

01/28/2008

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