2002 UNIFORM BUSINESS REPORT (UBR) M75171 **DOCUMENT#** 1. Entity Name J & M VENTURES, INC.

FILED
Jul 09, 2002 8:00 am
Secretary of State
07-09-2002 90027 040 ***150.00

Principal Place of Business 8130 W WATERS AVENUE. #100 TAMPA FL 33615 US			Mailing Address 8130 W WATERS AVENUE. #100 TAMPA FL 33615 US								
2. Principal P	lace of Busin	ess	3. Mailing Address						1 (0 0 0 11 	
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & State			City & State		4.	FEI Number 59-2883280			plied For t Applicable		
_Zip		Country	Zip	try	5.	5. Certificate of Status Desired \$8.75 Additional Fee Required					
	6. Name	and Address of Current F	egistered Agent				7. Name and Address of New Registered Agent				
CAVALLO		Name						İ			
	, JULIO, J. NATERS A\	Æ	Street			ddress (P.O. Box Number is Not Acceptable)					
TAMPA FL		.							·		
IMMEA FL	_ 33013										
					City		i	FL	Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.											
SIGNATURE.	Signature, typed	or printed name of registered agent er	d title if applicable. (NOTE	: Registered	d Agent signatu	re required when re	reinstating) DA	TE			
Tax filing r	-	ible to satisfy its Intangible and elects to do so.	FILE NOW!!! FEE.IS \$550.00 After September 13, 2002 Fee will be \$750 Make Check Payable to Department of Sta			e \$750.00	Election Campaign Financing Trust Fund Contribution.			May Be to Fees	
11. OFFICERS AND DIRECTORS						ΑC	DDITIONS/CHANGES TO OFFICERS	AND DI	RECTORS	IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT CAVALLO 8513 WOO TAMPA FL	ODBURN CT	CITY Delete TITLE NAM STRE] Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS CAVALLO 8513 WOO TAMPA FI	DDBURN CT						_] Change	Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Delete	CITY-	ET ADDRESS ST-ZIP	- 1/2 O . 1/2			Change	Addition	
indicated of the cor	on this repor poration or th	t or supplemental report is t ne receiver or trustee empov	rue and accurate and that m	ny signat	ure shall ha	ave the same	119.07(3)(i), Fiorida Statutes. I further legal effect as if made under oath; the rida Statutes; and that my name appear	at i am a	an officer (or director	

ESPECIAUISTILIO J. CAVALLO 7-2-02

B0197510 8130 W. Waters are # 100