2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002690

Entity Name: JLM - HEADQUARTERS, INC.

FILED Apr 17, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

713 BILTMORE WAY CORAL GABLES, FL 33134

Current Mailing Address: New Mailing Address:

713 BILTMORE WAY CORAL GABLES, FL 33134

FEI Number: 65-0657889 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SPACE, SONDRA C 1245 ANDALUSIA AVE CORAL GABLES, FL 33134 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:

- Flateric Circulate of Decideral Access

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 () Delete
 Title:
 D
 (X) Change () Addition

 Name:
 NIDO, LORETTA C
 Name:
 HUCKS, VICTORIA

 Address:
 7900 SW 152 TERRACE
 Address:
 5740 MICHELANGELO STREET

 City-St-Zip:
 MIAMI, FL 33157
 City-St-Zip:
 CORAL GABLES, FL 33146 US

Title: T () Delete Title: T (X) Change () Addition

 Name:
 GONZALEZ, YOLANDA
 Name:
 GONZALEZ, YOLANDA

 Address:
 6701 SW 107 COURT
 Address:
 6701 SW 107 COURT

 City-St-Zip:
 MIAMI, FL 33178
 City-St-Zip:
 MIAMI, FL 33178 US

Title: S () Delete Title: S (X) Change () Addition Name: DURAN, KATHLEEN B Name: DURAN, KATHLEEN B

 Name:
 DURAN, KATHLEEN B
 Name:
 DURAN, KATHLEEN B

 Address:
 2154 SW 24 STREET
 Address:
 2154 SW 24 STREET

 City-St-Zip:
 MIAMI, FL 33145
 City-St-Zip:
 MIAMI, FL 33145 US

Title: P () Delete Title: P (X) Change () Addition

Name: HUCKS, VICTORIA Name: HUCKS, VICTORIA

Address: 5740 MICHELANGELO STREET Address: 5740 MICHELANGELO STREET
City-St-Zip: MIAMI, FL 33146 City-St-Zip: CORAL GABLES, FL 33146 US

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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VICTORIA HUCKS P 04/17/2008