2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000067059

Entity Name: JM COMPUTING AND SERVICES, CORP.

FILED Apr 17, 2006 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

4944 NW 102TH AVE 9970 NW 9TH STREET CIRCLE

201 202

DORAL, FL 33178 MIAMI, FL 33172

New Mailing Address: Current Mailing Address:

9970 NW 9TH STREET CIRCLE 4944 NW 102TH AVE

202 DORAL, FL 33178 MIAMI, FL 33172

FEI Number: 22-3741155 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:

MARTINS COELHO, JORGE AUGSUTO MARTINS COELHO, JORGE AUGUSTO 4944 NW 102TH AVE 9970 NW 9TH STREET CIRCLE

201 202 DORAL, FL 33178 US MIAMI, FL 33172 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.

Title:

SIGNATURE: JORGE A COELHO 04/17/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete

(X) Change () Addition MARTINS COELHO, JORGE AUGUSTO MARTINS COELHO, JORGE AUGUSTO Name: Name:

4944 NW 102TH AVE #201 9970 NW 9TH STREET CIRCLE APT 202 Address: Address:

City-St-Zip: DORAL, FL 33178 City-St-Zip: MIAMI, FL 33172

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

Name: DA LEAKE, MICHELLE C Name: LEAKE, MICHELLE C

4944 NW 102TH AVE #201 Address: 9970 NW 9TH STREET CIRCLE APT 202 Address:

DORAL, FL 33178 MIAMI, FL 33172 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JORGE AUGUSTO COELHO PD 04/17/2006