


2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 27, 2006 08:00 AM
Secretary of State

DOCUMENT # P00000067770					
1. Entity Name J & B MACHINE SHOP, INC.					
Principal Place of Business 3259 N.W. 28TH STREET MIAMI FL 33142			Mailing Address 3259 N.W. 28TH STREET MIAMI FL 33142		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-1895781	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				Applied For: Not Applicable	
6. Name and Address of Current Registered Agent BARRIOS, RAYMUNDO 3259 N.W. 28TH STREET MIAMI FL 33142				7. Name and Address of New Registered Agent	
Name				Street Address (P.O. Box Number is Not Acceptable)	
City				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 <i>Raymundo Barrios-Playa</i> Signature, typed or printed name of registered agent and title (applicable)				DATE <i>1/25/06</i> DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PTSD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	BARRIOS, RAYMUNDO		NAME		
STREET ADDRESS	3259 N.W. 28TH STREET		STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33142		CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	BARRIOS, MAGELY		NAME		
STREET ADDRESS	3259 NW 28 ST.		STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33142		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11, if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Raymundo Barrios-Playa</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				<i>1/25/06 - 305-626-4222</i> Date Daytime Phone #	



1st MOORE CR2E034 (10/05)

\$8.75 Additional Fee Required

FL Zip Code

1/25/06
DATE

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

U000000404998
02/07/06-80023-010 158.75

SIGNATURE: *Raymundo Barrios-Playa*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/25/06 - 305-626-4222
Date Daytime Phone #