

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2007 8:00 am
Secretary of State

01-18-2007 90102 003 ***150.00

| | | | |
|--|--|--|---|
| DOCUMENT # P00000098887 1. Entity Name JMB REALTY, INC. | | | |
| Principal Place of Business 711-721 W. 16 ST. HIALEAH, FL 33010 | | Mailing Address 711 W 16TH ST. HIALEAH, FL 33010-2031 | |
| 2. Principal Place of Business - No P.O. Box # 4525 NW 37 Ave. | | 3. Mailing Address 4525 NW 37 Ave. | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State Miami, FL | | City & State Miami, FL | |
| Zip 33142 | | Zip 33142 | |
| Country | | Country | |
| 4. FEI Number 65-1049822 | | Applied For <input type="checkbox"/> Not Applicable | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent BLANCO, JOSE M 801 W 36 STREET HIALEAH, FL 33012 | | 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 4525 NW 37 Ave. City Miami FL Zip Code 33142 | |
| 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 | | 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 NAME STREET ADDRESS CITY-ST-ZIP | DPT BLANCO, JOSE M SR 801 W 36 ST. ST HIALEAH, FL 33012 | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4525 NW 37 Ave. Miami, FL 33142 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DVS BLANCO, RAMONA 801 W 36 ST. ST HIALEAH, FL 33012 | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Jose M. Blanco, President | | Date 1/12/07 Daytime Phone # (786) 587-2640 | |