

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000103563

Entity Name: JAIME GONZALEZ, INC.

FILED  
Jan 08, 2009  
Secretary of State

**Current Principal Place of Business:**

740 BLUEBIRD LANE  
PLANTATION, FL 333243159

**New Principal Place of Business:**

**Current Mailing Address:**

740 BLUEBIRD LANE  
PLANTATION, FL 333243159

**New Mailing Address:**

FEI Number: 65-1052797      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GONZALEZ, JAIME  
740 BLUEBIRD LANE  
PLANTATION, FL 333243159 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSD ( ) Delete  
Name: GONZALEZ, JAIME  
Address: 740 BLUEBIRD LANE  
City-St-Zip: PLANTATION, FL 333243159

Title: DVP ( ) Delete  
Name: GONZALEZ, MARIELENA  
Address: 740 BLUEBIRD LN  
City-St-Zip: PLANTATION, FL 33324

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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

SIGNATURE: JAIME GONZALEZ

PRES

01/08/2009

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date