

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000034238

Entity Name: JONES & JONES PARTNERS, INC.

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

5509 NW 7 AVE.
MIAMI, FL 33127

New Principal Place of Business:

2775 NE 187 ST
SUITE 517W
AVENTURA, FL 33180

Current Mailing Address:

2775 NE 187 ST
517W
AVENTURA, FL 33180

New Mailing Address:

FEI Number: 65-1094538 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, KAREN
2775 NE 187ST #517W
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

JONES, KAREN
2775 NE 187ST
SUITE 517W
AVENTURA, FL 33180 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: KAREN J. JONES

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JONES, KAREN
Address: 2775 NE 187 ST, 517W
City-St-Zip: AVENTURA, FL 33180

Title: S () Delete
Name: JONES-DAVIS, MELANIE
Address: 14075 NW 5TH PLACE
City-St-Zip: MIAMI, FL 33168

Title: T () Delete
Name: JONES, BETTY
Address: 14075 NW 5 PLACE
City-St-Zip: MIAMI, FL 33168

Title: V () Delete
Name: LEWIS, IKE JR
Address: 2775 NE 187ST #517W
City-St-Zip: AVENTURA, FL 33180

Title: S () Delete
Name: JONES-DAVIS, MELANIE
Address: 14075 NW 5 PL
City-St-Zip: MIAMI, FL 33168

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: JONES-DAVIS, MELANIE
Address: 5509 NW 7 AVE
City-St-Zip: MIAMI, FL 33127

Title: T (X) Change () Addition
Name: JONES, BETTY
Address: 2775 NE 187 ST, 517W
City-St-Zip: AVENTURA, FL 33180

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

Title: S (X) Change () Addition
Name: JONES-DAVIS, MELANIE
Address: 5509 NW 7 AVE
City-St-Zip: MIAMI, FL 33127

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: KAREN J JONES

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date