

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 15, 2004 08:00 AM
Secretary of State

DOCUMENT # P01000042247

1. Entity Name
JLM ENTERPRISES, INC.



Principal Place of Business
8425 W. HILLSBOROUGH AVE.
TAMPA, FL 33615

Mailing Address
8425 W. HILLSBOROUGH AVE.
TAMPA, FL 33615



01072004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3712062	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DASALOPOULOS, MICHAEL P
8425 W. HILLSBOROUGH AVE.
TAMPA, FL 33615

**DO NOT WRITE
IN THIS SPACE**

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 Michael Dasalopoulos

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

3/1/04
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U00000087430
03/15/04-80010-021 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	DASKALOPOULOS, MICHAEL P
STREET ADDRESS	8425 W. HILLSBOROUGH AVE.
CITY - ST - ZIP	TAMPA, FL 33615

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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CITY - ST - ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Michael P. Dasalopoulos
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/1/04
Date

727-28-1700
Daytime Phone #