## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000051519

Entity Name: JBAM INTERNATIONAL CORP.

22805 SW 66TH AVE. #205

BOCA RATON, FL 33428

Address:

City-St-Zip:

FILED Apr 28, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 22805 SW 66TH AVE. 8320 TRENT CT # 205 R BOCA RATON, FL 33428 BOCA RATON, FL 334338518 US **Current Mailing Address: New Mailing Address:** 22805 66TH AVE. 8320 TRENT CT # 205 BOCA RATON, FL 33428 BOCA RATON, FL 334338518 US FEI Number: 65-1108146 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FILHO, JOSE'S EAGLE TAX REPRESENTATION, CORP. 22805 SW 66TH AVE. 23150 SANDALFOOT PLAZA DRÎVE # 205 BOCA RATON, FL 33428 US BOCA RATON, FL 334286530 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: PAULO OLIVEIRA 04/28/2006 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition JUNIOR, ALDACIR M Name: Name: 22805 SW 66TH AVE Address: Address: City-St-Zip: BOCA RATON, FL 33428 City-St-Zip: VD Title: Title: () Delete () Change () Addition Name: SOUZA, OLGA F Name: 22805 SW 66TH AVE. #205 Address: Address: BOCA RATON, FL 33428 City-St-Zip: City-St-Zip: Title: Title: SD ( ) Delete () Change () Addition FILHO, JOSE S Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the 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.

Address:

City-St-Zip:

SIGNATURE: JOSE S FILHO SD 04/28/2006