

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 04, 2007 08:00 AM
Secretary of State

DOCUMENT # P01000104256

1. Entity Name
JDM INDUSTRIES, INC



Principal Place of Business
8021 NW 14TH STREET
DORAL, FL 33126

Mailing Address
PO BOX 522835
MIAMI, FL 33152



01242007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
76-0705450

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

RODRIGUEZ, JOSE
133 EAST 14TH STREET
HIALEAH, FL 33010

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE VP
NAME RODRIGUEZ, JOSE
STREET ADDRESS 133 EAST 14TH STREET
CITY-ST-ZIP HIALEAH, FL 33010

TITLE P
NAME GONGORA, DAVID
STREET ADDRESS 133 EAST 14TH STREET
CITY-ST-ZIP HIALEAH, FL 33010

TITLE VP
NAME GONGORA, MAGDELENIS
STREET ADDRESS 133 EAST 14TH STREET
CITY-ST-ZIP HIALEAH, FL 33010

TITLE VP
NAME GONGORA, JUAN D
STREET ADDRESS 133 EAST 14TH STREET
CITY-ST-ZIP HIALEAH, FL 33010

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U000000690372
04/11/07-80074-002 300.00

**DO NOT WRITE
IN THIS SPACE**

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

X 1/25/07 X 305 398-0160
Date Daytime Phone #