

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P01000119933

Entity Name: J-MIMA, INC.

FILED
Oct 06, 2005
Secretary of State

Current Principal Place of Business:

8430 NW 40TH ST
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

PO BOX 670524
CORAL SPRINGS, FL 33067

New Mailing Address:

FEI Number: 01-0651282

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLAXTON, MYRNA
4201 NW 75 AVE
CORAL SPRINGS, FL 33065 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CAMPBELL, ISABELLE
Address: 4201 NW 75 AVE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: TD () Delete
Name: CAMPBELL, LAWFORD II
Address: 4201 NW 75 AVE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: SD (X) Delete
Name: CAMPBELL, JUWANZA
Address: 4201 NW 75 AVE
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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 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: ISABELLE CAMPBELL

PD

10/06/2005

Electronic Signature of Signing Officer or Director

Date