2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000121078

1. Entity Name

TJM ENGINEERING, INC.



Mailing Address

Principal Place of Business 7455 W. FLAGLER STREET MIAMI, FL 33144

7455 W. FLAGLER STREET MIAMI, FL 33144

FILED Apr 30, 2008 08:00 AN Secretary of State



DO NOT WRITE IN THIS SPACE

04282008 No Chg-P CR2E034 (11/05)

4. FEI Number
04-3600387

Applied For
Not Applicable

5. Certificate of Status Desired

\$3.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HILL, MARLON A ESQ. 200 S. BISCAYNE BLVD., STE. 2750 MIAMI, FL 33131

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					
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when retristating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		Election Campaign Financing Trust Fund Contribution.	' _□	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-S1-ZIP	D ア JENKINS, RICK 7455 W. FLAGLER STREET MIAMI, FL 33144	·			U00000933501 05/22/08-80098-010 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP JENKINS, MICHAEL 7455 W FLAGLER ST MIAMI, FL 33144				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WATERS, JAMES 7455 W FLAGLER ST MIAMI, FL 33144			DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE		
NAME STREET ADDRESS CITY-SI-ZIP					
TITLE				~	

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:

NAME .
STREET ADDRESS
CITY-ST-ZIP

UPE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/08

305-266-2903