## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000033777

Entity Name: JAXMA GREENHOUSE, INC

FILED Jan 27, 2009 Secretary of State

Entity Nai	me: JAXIVIA G	REENHOUSE, INC.				
Current Principal Place of Business:			New Principal Place of Business:			
	HIGHWAY 17 S OVE SPRINGS					
Current Mailing Address:			New Mailing Address:			
	IIGHWAY 17 S OVE SPRINGS					
FEI Number: 01-0677985 FEI Number Applied For ( )		FEI Number Not Applicable ( ) Certificate of Status Desired ( )				
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:		
	NG K HIGHWAY 17 S OVE SPRINGS					
	named entity s e of Florida.	submits this statement for the	purpose of changing i	its registered office or registered agent, or both,		
SIGNATU						
	Electron	ic Signature of Registered Ag	ent	Date		
Election Car	mpaign Financing	Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	KIM, SHUNG K	Delete TON CREEK DR E, FL 32224	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	KIM, SONNIE S	TON CREEK DR	Title: Name: Address: City-St-Zip:	D (X) Change () Addition KIM, MIN S 13671 COVINGTON CREEK DR JACKSONVILLE, FL 32224		
Title: Name: Address: City-St-Zip:	KIM, DONNIE D	TON CREEK DR	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition KIM, LONNIE R MR 13671 COVINGTON CREEK DR JACKSONVILLE, FL 32224		
Title: Name: Address: City-St-Zip:	KIM, MIN S MR	TON CREEK DR	Title: Name: Address: City-St-Zip:	D (X) Change () Addition KIM, SONNIE S MR 13671 COVINGTON CREEK DR JACKSONVILLE, FL 32224		
Title: Name: Address:	KIM, LONNIE R	Delete MR TON CREEK DR	Title: Name: Address:	D (X) Change ( ) Addition KIM, DONNIE D MR 13671 COVINGTON CREEK DR		

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

City-St-Zip: JACKSONVILLE, FL 32224

SIGNATURE: SHUNG KIM P 01/27/2009

City-St-Zip: JACKSONVILLE, FL 32224