

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000029413

FILED
Jan 09, 2004
Secretary of State

Entity Name: JMS DESIGNS OF FLORIDA, INC.

Current Principal Place of Business:

10295B NW 46TH ST
SUNRISE, FL 33351

New Principal Place of Business:

10275 NW 46TH ST
SUNRISE, FL 33351

Current Mailing Address:

10295B NW 46TH ST
SUNRISE, FL 33351

New Mailing Address:

10275 NW 46TH ST
SUNRISE, FL 33351

FEI Number: 22-3368517

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHARKEY, BRUCE
1396 CAMELLA CIR
WESTON, FL 33326 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SHARKEY, BRUCE
Address: 1396 CAMILLA CIR
City-St-Zip: WESTON, FL 33326

Title: V () Delete
Name: SHARKEY, SUSAN
Address: 1396 CAMILLA CIR
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: BRUCE SHARKEY

P

01/09/2004

Electronic Signature of Signing Officer or Director

Date