

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P04000023266

**Entity Name:** JONMAC & ASSOCIATES, INC.

**FILED**  
**Nov 02, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

9050 PINES BOULEVARD  
SUITE 415  
PEMBROKE PINES, FL 33024

**New Principal Place of Business:**

**Current Mailing Address:**

9050 PINES BOULEVARD  
SUITE 415  
PEMBROKE PINES, FL 33024

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MCPHERSON, VENORA  
9050 PINES BOULEVARD  
SUITE 415  
PEMBROKE PINES, FL 33024 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: VENORA MCPHERSON

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MCPHERSON, VENORA  
Address: 9050 PINES BOULEVARD, SUITE 415  
City-St-Zip: PEMBROKE PINES, FL 33024 US

Title: V  
Name: JOHNSON, HOWARD  
Address: 9050 PINES BOULEVARD, SUITE 415  
City-St-Zip: PEMBROKE PINES, FL 33024 US

Title: S  
Name: PEREZ, RUBEN LCAM  
Address: 9050 PINES BOULEVARD, SUITE 415  
City-St-Zip: PEMBROKE PINES, FL 33024

I hereby 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 all other like empowered.

SIGNATURE: VENORA MCPHERSON

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PRES

11/02/2011

\_\_\_\_\_  
Date