

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Sep 07, 2007 8:00 am
Secretary of State

09-07-2007 90002 004 ***155.00

DOCUMENT # P04000037164

1. Entity Name
JAMES-GORDON, INC.



Principal Place of Business
**14507 SW 137TH PATH
MIAMI, FL 33186**

Mailing Address
**14507 SW 137TH PATH
MIAMI, FL 33186**

DO NOT WRITE IN THIS SPACE



08312007 No Chg-P CR2E034 (11/05)

4. FEI Number
90-0150785

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**JAMES-GORDON, JAMES
14507 SW 137TH PATH
MIAMI, FL 33186**

**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 reappointing)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPC JAMES-GORDON, PRUDENCE 14507 SW 137TH PATH MIAMI, FL 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS GORDON, COPELAND M 14507 SW 137TH PATH MIAMI, FL 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPC JAMES-GORDON, PRUDENCE 14507 SW 137 PATH MIAMI, FL 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS GORDON, COPELAND 14507 SW 137 PATH MIAMI, FL 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPC JAMES-GORDON, PRUDENCE 14507 SW 137 PATH MIAMI, FL 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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:

Copeland Gordon
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/3/07
Date

305-234-3034
Daytime Phone

ATTACHMENT

40131697
~~#P04000037164~~

James - Gordon Inc

14507 SW 137 Path

miami, FL 33186

9/3/07

Florida Dept. of State

Secretary of State

Division of Corporations

P.O. Box 8700

Tallahassee, FL 32314

To whom it may concern:

This is to serve as an explanation that we did not file before now, as we did not receive notice to file.

Enclosed is a check for \$150.00

Sincerely,

P.C. James - Gordon.