

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000131300

Entity Name: LM,JM, & JM NUTRITION INC

FILED
Jul 17, 2006
Secretary of State

Current Principal Place of Business:

4412 NORTHLAKE BLVD
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

Current Mailing Address:

4412 NORTHLAKE BLVD
PALM BEACH GARDENS, FL 33410

New Mailing Address:

FEI Number: 20-1637246

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COHEN, DAVID J
3275 W HILLSBORO BLVD
SUITE 207
DEERFIELD BEACH, FL 33442 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MAVROS, JOHN SR
Address: 11 ALLEN DRIVE
City-St-Zip: LOTCUS VALLEY, NY 11560

Title: D () Delete
Name: MAVROS, JOHN II
Address: 3570 HILLSBORO BLVD #103
City-St-Zip: COCONUT CREEK, FL 33073

Title: D () Delete
Name: PTARCINSKI, LISA M
Address: 3570 W HILLSBORO BLVD #103
City-St-Zip: COCONUT CREEK, FL 33073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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.

SIGNATURE: JOHN MAVROS

P

07/17/2006

Electronic Signature of Signing Officer or Director

Date