

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 14, 2007 8:00 am
Secretary of State

05-14-2007 90099 018 ***150.00

DOCUMENT # P04000152971					
1. Entity Name J2M DEVELOPMENT INC.					
Principal Place of Business 411 EAST HILLSBORO BLVD 202 DEERFIELD BEACH, FL 33441 US			Mailing Address 411 EAST HILLSBORO BLVD 202 DEERFIELD BEACH, FL 33441 US		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 20-1978394	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
\$8.75 Additional Fee Required				05072007 Chg-P CR2E034 (12/06)	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
CHASE, JEAN A 1129 ROYAL PALM BEACH BLVD 72 ROYAL PALM BEACH, FL 33412				Name	
Street Address (P.O. Box Number is Not Acceptable)				City	
FL				Zip Code	
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 <u><i>[Signature]</i></u> DATE <u>5-7-07</u>					
(NOTE: Registered Agent signature required when reinstating)					
Website was down 150.00 All of FILE NOW!!! FEE IS 1500.00 Due by September 14, 2007 MAY 1, 2007 (see attached)			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPSD SANDHOLZER, MICHAEL 4676 CONCORDIA LANE BOYNTON BEACH, FL 33436	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPSD Sandholzer, Michael 4341 9th place Vero Beach, FL 32966	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD BARKER, JEFFREY 113 NW 10TH ST BOCA RATON, FL 33432	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS CHASE, JEAN 1129 ROYAL PALM BEACH BLVD # 72 ROYAL PALM BEACH, FL 33411	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>	Change <input type="checkbox"/> Addition <input type="checkbox"/>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>	Change <input type="checkbox"/> Addition <input type="checkbox"/>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>	Change <input type="checkbox"/> Addition <input type="checkbox"/>
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: <u><i>[Signature]</i></u> DATE <u>5/7/07</u>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

ATTACHMENT
40113533
#P04000152971

Print Message

Close this window

From: <michael@j2mdevelopment.com> [Add to Address Book](#)
Date: 2007/05/01 Tue PM 09:53:46 EST
To: <consum@doacs.state.fl.us>
CC: <michael@j2mdevelopment.com> [Add to Address Book](#)
Subject: Florida Consumer Services Complaint Form

Date: 5/1/2007 10:53:46 PM

Person Filing Complaint:

Michael Sandholzer
4341 9th Place,
Vero Beach Florida 32966 USA
Work Phone: 561-577-3845
Home Phone: 772-770-0055
Age Group: 36 to 45

Business or Person Complained Against:

Department of State
Division of Corporations
Corporate Filings, P.O. Box 6327
Tallahassee, FL 32314 USA
Product or Service Involved: Corporate Annual Report
Cost of Product: \$550.00 per business

Explain Your Complaint Fully: Myself, my book keeper, and my accountant tried all day separately to do electronic filings for three Florida Corporation Annual Reports, but were told the server was unable to process our requests (over 50 times). Once I even made it 3/4 of the way through the process before being kicked off.

What Would Satisfy Your Complaint?: I would like to be noted for filing on time for the following three businesses: J2M Development, Inc (DOC.#P04000152971) Top Dollar LLC (DOC.#L06000046583) Sandman Construction LLC (DOC.#L06000054970)

Do you authorize DOACS to send a copy of complaint to the business you are complaining against or any other government agency for purposes of mediation, investigation or enforcement?: Yes

Have you read 'FALSE OFFICIAL STATEMENTS' provided in the Florida Statutes?: Yes

Have you read the paragraph regarding the role of the Department of Agriculture and Consumer Services in providing assistance to you?: Yes

Signature: Michael Sandholzer
Date of Signature: 05/01/07
E-mail Address: michael@j2mdevelopment.com