

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000032763

Entity Name: JATAMA CORP.

FILED
May 01, 2006
Secretary of State

Current Principal Place of Business:

1252 MARIANA AVE
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

1252 MARIANA AVE
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 20-4791090

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LISETTE PIE SALAZAR, P.A.
260 CRANDON BLVD #48
KEY BISCAYNE, FL 33149 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: CABRERA, MAGDALENA
Address: 1252 MARIANA AVE
City-St-Zip: CORAL GABLES, FL 33134

Title: D () Delete
Name: TAMAYO, JUAN D
Address: 830 ALMERIA AVE
City-St-Zip: CORAL GABLES, FL 33134

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 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: MAGDALENA CABRERA

D

05/01/2006

Electronic Signature of Signing Officer or Director

Date