## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000037054

**Entity Name: JOTA FRAMING INC** 

FILED Apr 01, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

17 B COLUMBIA LN

PALM COAST, FL 32137 US

**Current Mailing Address: New Mailing Address:** 

PO BOX 354809

PALM COAST, FL 32135 US

FEI Number: 16-1718688 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ESPINOSA, JOSE LUIS L ESPINOSA, JOSE LUIS L PRES. 17 B COLUMBIA LN 17 B COLUMBIA LN

PALM COAST, FL 32137 US PALM COAST, FL 32137 US

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: JOSE LUIS ESPINOSA 04/01/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: ( ) Delete Title: PRFS

Title: (X) Change ( ) Addition ESPINOSA, JOSE LUIS ESPINOSA, JOSE LUIS L PRES Name: Name: 17 B COLUMBIA LN 17 B COLUMBIA LN Address: Address: City-St-Zip: PALM COAST, FL 32137 City-St-Zip: PALM COAST, FL 32137

Title: Title: V.P. (X) Change ( ) Addition () Delete ESPINOSA, JOSE MIGUEL M VP Name: ESPINOSA, JOSE MIGUEL Name: 17 B COLUMBIA LN 17 B COLUMBIA LN Address: Address: PALM COAST, FL 32137 PALM COAST, FL 32137 City-St-Zip: City-St-Zip:

( ) Delete Title: Title: S/T (X) Change ( ) Addition ESPINOSA, CATHARINE J ESPINOSA, CATHARINE J SEC/TRE Name: Name:

17 B COLUMBIA LN 17 B COLUMBIA LN Address: Address: City-St-Zip: PALM COAST, FL 32137 City-St-Zip: PALM COAST, FL 32137

Title: (X) Delete Title: () Change () Addition

MONTENEGRO, HERNAN Name: Name: Address: 17 B COLUMBIA LN Address: City-St-Zip: PALM COAST, FL 32137 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JOSE LUIS ESPINOSA **PRES** 04/01/2009