

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

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

05-16-2007 90026 006 ***150.00

DOCUMENT # P05000046378

1. Entity Name
J & M PACKING CONTRACTORS, INC.



Principal Place of Business
**2038 PARK VILLAGE DRIVE
RUSKIN, FL 33570**

Mailing Address
**PO BOX 506
RUSKIN, FL 33570**



04072007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-2576362

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**VELADEZ, MARIA
2038 PARK VILLAGE DRIVE
RUSKIN, FL 33570**

**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 *Jose V. Gomez* (NOTE: Registered Agent signature required when reappointing) DATE 07/28/07

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00.**

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 | DPT VELADEZ, MARIA 2038 PARK VILLAGE DRIVE RUSKIN, FL 33570 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | DVPS GOMEZ, JOSE V 2038 PARK VILLAGE DRIVE RUSKIN, FL 33570 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |

**DO NOT WRITE
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: *Jose V. Gomez*
SIGNATURE AND TYPED OR PRINTED NAME OF SHOWING OFFICER OR DIRECTOR

Date Daytime Phone #