

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2006 8:00 am
Secretary of State

03-14-2006 90034 001 ***150.00

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1. Entity Name
J&M BROTHERS CARPENTRY INC



Principal Place of Business
911 W MC NAB RD
SUITE 401
POMPAÑO BEACH, FL 33060

Mailing Address
911 W MC NAB RD
SUITE 401
POMPAÑO BEACH, FL 33060

40031200



2. Principal Place of Business
1141 S.W. 30' ST.
Suite, Apt. #, etc.

3. Mailing Address
1141 S.W. 30' ST.
Suite, Apt. #, etc.

03092006 Chg-P CR2E034 (11/05)

City & State
FT. LAUDERDALE FL.

City & State
FT. LAUDERDALE FL.

4. FEI Number
20-2596835

Applied For
Not Applicable

Zip
33315

Country
Broward

Zip
33315

Country
Broward

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

6. Name and Address of Current Registered Agent

COVARRUBIAS, MIGUEL A
911 W MC NAB RD
SUITE 401
POMPAÑO BEACH, FL 33060

7. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **COVARRUBIAS, MIGUEL A**
STREET ADDRESS **9911 W MC NAB RD SUITE 401**
CITY-ST-ZIP **POMPAÑO BEACH, FL 33060**

TITLE **VP** ☐ Delete
NAME **COVARRUBIAS, JOSE F**
STREET ADDRESS **911 SW 15 ST SUITE 401**
CITY-ST-ZIP **POMPAÑO BEACH, FL 33060**

TITLE **S** ☒ Delete
NAME **VENTURA, JORGE**
STREET ADDRESS **911 SW 15 ST SUITE 401**
CITY-ST-ZIP **POMPAÑO BEACH, FL 33060**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 employees.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Miguel A. Covarrubias

03/09/06 (951) 691-7127

Date

Daytime Phone #