2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000113447

MEDINA, YOSÚEL

MIAMI, FL 33157

18309 SW 114 COURT

Name:

Address:

City-St-Zip:

Entity Name: J & MM INTERNATIONAL GROUP INC

FILED Jul 10, 2009 Secretary of State

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Current P	rincipal Plac	e of Business:	New Principal Place of Business:			
18309 SW MIAMI, FL	114 COURT 33157 US	_				
Current Mailing Address:			New Mailing Address:			
18309 SW MIAMI, FL	114 COURT 33157 US	_				
FEI Number	: 20-3320740	FEI Number Applied For()	FEI Number Not App	licable ()	Certificate of Status Desired ()	
Name and	d Address of	Current Registered Agent:	Name and	Address of	New Registered Agent:	
11300 NW 150		TO FL 33018 US				
The above in the State	e named entity e of Florida.	submits this statement for the p	ourpose of changing i	ts registered	office or registered agent, or both,	
SIGNATUI	RE:					
	Electro	onic Signature of Registered Age	ent	Date		
		93(2)(b), F.S., the corporation did nongerous Fund Contribution ().	ot receive the prior notic	e.		
OFFICER	S AND DIRE	CTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	P (DELGADO, D 17922 NW 48 MIAMI, FL 33	PL	Title: Name: Address: City-St-Zip:	P,D () MEDINA, YOS 18309 SW 114 MIAMI, FL 33	4 CT	
Title: Name: Address: City-St-Zip:	VP (DELGADO, D 17922 NW 48 MIAMI, FL 33	PL	Title: Name: Address: City-St-Zip:	VP,D (X VALDES, JAC 18309 SW 11 MIAMI, FL 33	4 CT	
Title: Name: Address: City-St-Zip:	CFO (MIGUENZ, AN 3180 NW 67 : MIAMI, FL 33	ST	Title: Name: Address: City-St-Zip:	CFOD () GONZALEZ, R 18309 SW 114 MIAMI, FL 33	4 CT	
Title:	CEOD (X) Delete	Title:	() Change ()Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: YOSUEL MEDINA P,D 07/10/2009