

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000138756

FILED  
Jan 14, 2007  
Secretary of State

Entity Name: JOMARIE PROPERTY MANAGEMENT INCORPORATED

## Current Principal Place of Business:

481 WATERFORD CIRCLE EAST  
TARPON SPRINGS, FL 34688

## New Principal Place of Business:

501 BAYVIEW BLVD  
OLDSMAR, FL 34677

## Current Mailing Address:

481 WATERFORD CIRCLE EAST  
TARPON SPRINGS, FL 34688

## New Mailing Address:

501 BAYVIEW BLVD  
OLDSMAR, FL 34677

FEI Number: 03-0571625

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PE, JOSE A  
481 WATERFORD CIRCLE EAST  
TARPON SPRINGS, FL 34688 US

## Name and Address of New Registered Agent:

PE, JOSE A  
501 BAYVIEW BLVD  
OLDSMAR, FL 34677 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:

01/14/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: PE, JOSE A  
Address: 481 WATERFORD CIRCLE EAST  
City-St-Zip: TARPON SPRINGS, FL 34688

Title: VPD ( ) Delete  
Name: PE, MARIA VICTORIA O  
Address: 481 WATERFORD CIRCLE EAST  
City-St-Zip: TARPON SPRINGS, FL 34688

Title: SD ( ) Delete  
Name: PE, CHERYL O  
Address: 481 WATERFORD CIRCLE EAST  
City-St-Zip: TARPON SPRINGS, FL 34688

Title: TD ( ) Delete  
Name: PE, BRIAN O  
Address: 481 WATERFORD CIRCLE EAST  
City-St-Zip: TARPON SPRINGS, FL 34688

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: PE, JOSE A  
Address: 501 BAYVIEW BLVD  
City-St-Zip: OLDSMAR, FL 34677

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JOSE PE

PRES

01/14/2007

Electronic Signature of Signing Officer or Director

Date