2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P94000059403

FILED Jan 25, 2007 08:00 AN Secretary of State

1. Entity Nar JACO-M	EAT, INC.					ceretary or sta
Principal Plan 1392 W 391 HIALEAH, FI	TH PL	Mailing Address 1392 W 39TH PL HIALEAH, FL 33012				
_	OO NOT WRITE II	CE	01092007 4. FEI Numb 65-052	No Chg-P	CR2E034 (11/05) Applied For Not Applicable \$8.75 Additional Fee Required	
JACOME, RAUL A 1392 W 39TH PL HIALEAH, FL 33012 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. 1 am familiar with, and accept						
the obliga	tions of registered agent.	· · · · · · · · · · · · · · · · · · ·	d Agent signature required			DATE
FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.			cing \$5.	00 May Be ad to Fees	01/29/07-80	13934 1028-020 150.00
10. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP HILE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP HILE NAME STREET ADDRESS CITY-SI-ZIP HILE	OFFICERS AND DIRECT DVPS JACOME, RAUL A 1392 W 39TH PL HIALEAH, FL 33012	JTORS			NOT WE	
NAME STREET ATTRESS						

12. I hereby certify that the information supplied with this filling 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

CITY-ST-ZIP

SIGNATURE;