

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000017218

Entity Name: JMX ENTERPRISES, INC.

FILED
May 02, 2007
Secretary of State

Current Principal Place of Business:

4843 PALM BROOKE CIRCLE
WEST PALM BEACH, FL 33417

New Principal Place of Business:

443 PALM BROOKE CIRCLE
WEST PALM BEACH, FL 33417

Current Mailing Address:

4843 PALM BROOKE CIRCLE
WEST PALM BEACH, FL 33417

New Mailing Address:

PO BOX 111468
PALM BAY, FL 32907

FEI Number: 65-0559418

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MELENDEZ, JUAN J
4843 PALM BROOKE CIRCLE
WEST PALM BEACH, FL 33417 US

Name and Address of New Registered Agent:

MELENDEZ, J
443 PALM BROOKE CIRCLE
WEST PALM BEACH, FL 33417 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: J MELENDEZ

05/02/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MELENDEZ, JUAN J
Address: 4843 PALM BROOKE CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33417

Title: V () Delete
Name: MELENDEZ, MARLENE
Address: 4843 PALM BROOKE CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33417

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MELENDEZ, J
Address: 443 PALM BROOKE CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33417

Title: V (X) Change () Addition
Name: MELENDEZ, M
Address: 443 PALM BROOKE CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33417

Title: D () Change (X) Addition
Name: TTHOMPSON, G
Address: PO BOX 111468
City-St-Zip: PALM BAY, FL 32907

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.

SIGNATURE: GTHOMPSON

D

05/02/2007

Electronic Signature of Signing Officer or Director

Date