

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91898 020 ***150.00

DOCUMENT # P97000029141

1. Entity Name
JLM INVESTMENTS, INC.



Principal Place of Business
**348 TURNSTONE WAY
ORLANDO, FL 32828**

Mailing Address
**348 TURNSTONE WAY
ORLANDO, FL 32828**

2. Principal Place of Business
3850 CURRY FORD ROAD
Suite, Apt. #, etc.

3. Mailing Address
1516 HUNTERS MILL PL
Suite, Apt. #, etc.



☐ CHECK HERE IF MAKING CHANGES

City & State
ORLANDO FL
Zip
32806
Country
ORANGE

City & State
ORLANDO FL
Zip
32765
Country
SEMINOLE

4. FEI Number
59-3431091
Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**MARTINEZ, JORGE L
348 TURNSTONE WAY
ORLANDO, FL 32828**

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, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DPT
MARTINEZ, JORGE L
348 TURNSTONE WAY
ORLANDO, FL 32828** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DV
MARTINEZ, MIGUEL A
348 TURNSTONE WAY
ORLANDO, FL 32828** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DS
MARTINEZ, MIGDALIA P-
348 TURNSTONE WAY
ORLANDO, FL 32828** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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NAME
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CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Cayman Phone #

4-27-03 407-894-5054

CR2E034 (10/02)