

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000097944

Entity Name: J.E.S.M., INC.

FILED
Jan 23, 2009
Secretary of State

Current Principal Place of Business:

540 CLEMATIS
HOLLYWOOD, FL 33008

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2914
HOLLYWOOD, FL 33008

New Mailing Address:

FEI Number: 65-0795695

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIMOUN, ROGER
128 OCEAN BLVD
GOLDEN BEACH, FL 33160 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MIMOUN, ROGER
Address: 128 OCEAN BLVD
City-St-Zip: GOLDEN BEACH, FL 33160

Title: STD () Delete
Name: MIMOUN, PAUL
Address: P.O. BOX 2914
City-St-Zip: HALLANDALE, FL 33008

Title: VPD () Delete
Name: MIMOUN, ELIE
Address: P.O. BOX 2914
City-St-Zip: HALLANDALE, FL 33008

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: ROGER MIMOUN

PD

01/23/2009

Electronic Signature of Signing Officer or Director

Date