


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2006 08:00 AM
Secretary of State

DOCUMENT # P98000042066

1. Entity Name
JL MANUFACTURING, INC.



Principal Place of Business
13204 SW 131 STREET
MIAMI, FL 33186 US

Mailing Address
12975 S W 190 TERRACE
MIAMI, FL 33177 US

DO NOT WRITE IN THIS SPACE



01052006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0834126

Applied For
Not Applicable

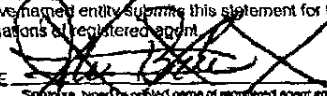
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

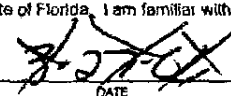
6. Name and Address of Current Registered Agent

BAKER, JOSEPH W
12975 SW 190 TERRACE
MIAMI, FL 33177

**DO NOT WRITE
IN THIS SPACE**

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  (NOTE: Registered Agent signature required when resigning)

DATE 

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

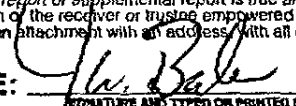
U00000485544
04/12/06-80087-013 150.00

10. OFFICERS AND DIRECTORS

TITLE	PSD
NAME	BAKER, JOSEPH W
STREET ADDRESS	12975 SW 190 TERRACE
CITY-ST-ZIP	MIAMI, FL 33177
TITLE	VTD
NAME	BAKER, LUCY ANN
STREET ADDRESS	12975 SW 190 TERRACE
CITY-ST-ZIP	MIAMI, FL 33177
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

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

SIGNATURE:  3-27-06 305-238-4116

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #