2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000091669

Entity Name: JMG INSYSTEM, INC.

FILED Jan 22, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2624 NW 97 AVE 2626 NW 97 AVE MIAMI, FL 33172 MIAMI, FL 33172

Current Mailing Address: New Mailing Address:

2624 NW 97 AVE 2626 NW 97 AVE MIAMI, FL 33172 MIAMI, FL 33172

FEI Number: 65-0879240 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

 SERECA CORP
 SERECA CORP

 2624 NW 97 AVE
 2626 NW 97 AVE

 MIAMI, FL 33172
 US

 MIAMI, FL 33172
 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: CARLOS LEZAMA 01/22/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 GONZALEZ, JOSE M
 Name:
 LEZAMA, CARLOS

 Address:
 2626 NW 97 AVENUE
 Address:
 2626 NW 97 AVENUE

 City-St-Zip:
 DORAL, FL 33172 US
 City-St-Zip:
 DORAL, FL 33172 US

Title: V (X) Delete Title: () Change () Addition

 Name:
 LEZAMA, CARLOS
 Name:

 Address:
 2624 NW 97 AVE.
 Address:

 City-St-Zip:
 MIAMI, FL 33172 US
 City-St-Zip:

 Name:
 DIAZ, MARIA A
 Name:
 DIAZ, MARIA A

 Address:
 2624 NW 97 AVE
 Address:
 2626 NW 97 AVE

 City-St-Zip:
 MIAMI, FL 33172 US
 City-St-Zip:
 MIAMI, FL 33172 US

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: CARLOS LEZAMA PD 01/22/2009