

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000064299

FILED  
Mar 21, 2008  
Secretary of State

Entity Name: JOSE MIGUEL ENTERPRISES, INC.

**Current Principal Place of Business:**

2620 NW 97TH AVE  
DORAL, FL 33172

**New Principal Place of Business:**

**Current Mailing Address:**

2620 NW 97TH AVE  
DORAL, FL 33172

**New Mailing Address:**

FEI Number: 65-0916436

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SILVA, FERNANDO M  
16300 NE 19TH AVENUE  
SUITE C  
NORTH MIAMI BEACH, FL 33162 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: P ( ) Delete  
Name: VELASQUEZ, JOSE M  
Address: 2620 NW 97TH AVE  
City-St-Zip: DORAL, FL 33172

Title: T ( ) Delete  
Name: HECTOR, TOVAR J  
Address: 934 MICHIGAN AVE., # 303  
City-St-Zip: MIAMI BEACH, FL 33139

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: JOSE VELASQUEZ

PRES

03/21/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date