


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 09, 2007 8:00 am**  
**Secretary of State**

04-09-2007 90075 034 \*\*\*150.00

<b>DOCUMENT # P99000107082</b>					
<b>1. Entity Name</b> JMS INDUSTRIES, INC.					
<b>Principal Place of Business</b> 1175 N.E. 125TH ST., STE. 102 N. MIAMI, FL 33161			<b>Mailing Address</b> 1175 N.E. 125TH ST., STE. 102 N. MIAMI, FL 33161		
<b>2. Principal Place of Business - No P.O. Box #</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		02022007    Chg-P    CR2E034 (12/06)	
Zip		Country		<b>4. FEI Number</b> 65-0966519	
Zip		Country		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>			<b>7. Name and Address of New Registered Agent</b>		
TATE, J. KENNETH 1175 N.E. 125TH ST., STE. 102 NORTH MIAMI, FL 33161			Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code		
<b>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.</b>					
<b>SIGNATURE</b> _____ (NOTE: Registered Agent signature required when reinstating)    DATE _____					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
<b>TITLE</b> PD	<b>NAME</b> TATE, J. KENNETH		<input type="checkbox"/> Delete		
<b>STREET ADDRESS</b> 1175 NE 125TH ST	<b>CITY-ST-ZIP</b> N. MIAMI, FL 33161		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>TITLE</b> VDS	<b>NAME</b> TATE, JAMES D		<input type="checkbox"/> Delete		
<b>STREET ADDRESS</b> 1175 NE 125TH ST	<b>CITY-ST-ZIP</b> MIAMI, FL 33161		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>TITLE</b> TD	<b>NAME</b> KOHN, RICHARD		<input type="checkbox"/> Delete		
<b>STREET ADDRESS</b> 1175 NE 125TH ST	<b>CITY-ST-ZIP</b> N. MIAMI, FL 33161		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>TITLE</b> V	<b>NAME</b> SOMERSTEIN, BARRY E		<input type="checkbox"/> Delete		
<b>STREET ADDRESS</b> 1175 NE 125TH ST	<b>CITY-ST-ZIP</b> N. MIAMI, FL 33161		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>TITLE</b> 	<b>NAME</b> 		<input type="checkbox"/> Delete		
<b>STREET ADDRESS</b> 	<b>CITY-ST-ZIP</b> 		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>TITLE</b> 	<b>NAME</b> 		<input type="checkbox"/> Delete		
<b>STREET ADDRESS</b> 	<b>CITY-ST-ZIP</b> 		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>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.</b>					
<b>SIGNATURE:</b> _____			J. Kenneth Tate 4/4/07		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date    305-891-1107    Daytime Phone #		