



**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 11, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # S54407</b> 1. Entity Name <b>JEMA INVESTMENTS, INC.</b>	
---	---

Principal Place of Business <b>300 ATLANTIC DR BAY #6 KEY LARGO, FL 33037 US</b>	Mailing Address <b>P O BOX 466 KEY LARGO, FL 33037 US</b>
---	--

**DO NOT WRITE IN THIS SPACE**



01142008 No Chg-P CR2E034 (11/05)

4. FEI Number <b>65-0268950</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**MONTEGUDO, JESUS  
185 ATLANTIC BLVD  
KEY LARGO, FL 33037**

**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 reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	<b>U000000824589 02/20/08-80084-014 150.00</b>
---	---	--

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D MONTEGUDO, JESUS PO BOX 466 KEY LARGO, FL 33037</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T MONTEGUDO, ALEXANDER 69 BAHAMA AVENUE KEY LARGO, FL 33037</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T MONTEGUDO, JESUS JR 137 MARINA AVE KEY LARGO, FL 33037</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
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:** *Jesus Montegudo* **2-7-08** **305 522 0075**

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