

**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 04, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # V07099.**

1. Entity Name  
**J & M PLASTERING INC.**



Principal Place of Business

16333 NW 84 PL  
 MIAMI, FL 33016

Mailing Address

16333 NW 84 PL  
 MIAMI, FL 33016 US



03242008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
 65-0315212 Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent

SEVILLA, JUANA  
 16333 NW 84 PLACE  
 MIAMI, FL 33016

**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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

OFFICER	PD
NAME	SEVILLA, ROBERTO A
STREET ADDRESS	16333 NW 84 PL.
CITY, ST, ZIP	MIAMI, FL 33016
OFFICER	PD
NAME	SEVILLA, JUANA
STREET ADDRESS	16333 NW 84 PL
CITY, ST, ZIP	MIAMI, FL 33016
OFFICER	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
OFFICER	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
OFFICER	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

U00000881065  
 04/15/08-80087-002 150.00

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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: *Juana A. Sevilla* **JUANA A. SEVILLA** *4/1/08* **4/1/08** *(305)825-7834* **(305)825-7834**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #