

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION ANNUAL REPORT <b>1995</b>		FLORIDA DEPARTMENT OF STATE Sandra B. Northen Secretary of State DIVISION OF CORPORATIONS
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**FILED**  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS

95 JAN 19 PM 4:11

**DOCUMENT # P94000001901 (5)**

1. Corporation Name  
**JNJR, INC.**

Principal Place of Business <b>6321 WESTOVER RD WEST PALM BEACH FL 33417</b>	Mailing Address <b>6321 WESTOVER RD WEST PALM BEACH FL 33417</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21	2a. Mailing Address 25
22 Suite, Apt #, etc	27 Suite, Apt #, etc
23 City & State	28 City & State
24 Zip	29 Zip
Country	Country

3. Date Incorporated or Qualified <b>01/07/1994</b>	3a. Date of Last Report
4. FEI Number <b>65-0462051</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**KAYE, ROBERT ESQ  
1500 W CYPRESS CREEK RD  
SUITE 207  
FT LAUDERDALE FL**

10. Name and Address of New Registered Agent

81 Name <b>Kaye &amp; Roger, P.A.</b>
82 Street Address P.O. Box Number if Not Acceptable
83
84 City
85 Zip Code <b>FL</b>

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in this State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Robert Kaye* **President** DATE: **1-11-95**

12. OFFICERS AND DIRECTORS

TITLE	<b>D</b>
NAME	<b>NATALE, JOHN N JR</b>
STREET ADDRESS	<b>6321 WESTOVER RD</b>
CITY, ST, ZIP	<b>WEST PALM BEACH FL 33417</b>
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY, ST, ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY, ST, ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 130.07(3)(b), Florida Statutes. I further certify that the information included on this annual report or supplemental annual 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 make up this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of a change or on an attachment with an address.

SIGNATURE: *John N. Natale*  
 PRINTED AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR

DATE: **1-11-95**