2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Jan 24, 2007 8:00 am DOCUMENT # P95000031609 **Secretary of State** 01-24-2007 90046 011 ***150.00 JJR PROPERTIES, INC. Principal Place of Business Mailing Address 380 COLUMBIA DR 380 COLUMBIA DR STE 110 WEST PALM BEACH FL 33409 W PALM BCH FL 33409 2. Principal Place of Business - No P O Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 65-0579135 Not Applicable Zip Country 7ip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name STEVENS, MICHAEL J Street Address (P.O. Box Number is Not Acceptable) 380 COLUMBIA DR STE 110 SUITE 103 WEST PALM BCH FL 33409 City Zip Code 8. The above named offity 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, lyped or printed name of registered agent and like i applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. ns Ш ☐ Delete . HHE Change ☐ Addition RINKER JOHN J. RINKER, JOHN J NAMI NAMI 108 GLENBROOK COURT 5 SOUTH LAKE THAIL SHIELT ADDRESS STREET LADDRESS ATLANTIS FL PAIM BIPH FL 33480 CITY ST-ZIP CITY ST 7IP PT 11111 ☐ Defete TITLE Change Addition STEVENS, MICHAEL J NAME NAMI 380 COLUMBIA DRIVE STE 110 STREET LADORESS STREET ADDRESS WEST PALM BEACH FL 33409 CHY-ST-ZIP CHY ST 7P 11111 Delete mu Change ☐ Addition NAMI SANTOS, ORFILIA T NAM STREET ADORESS 380 COLUMBIA DR #110 STREET ADDRESS WEST PALM BEACH FL 33409 CHY SE-7IP CITY ST ZIP ☐ Delete THE ant ☐ Change ☐ Addition NAME NAMI STREET ADDRESS STREET ADDRESS CHY ST ZIP CHY SI 7IP Defete ☐ Change ☐ Addition NAME NAMI STREET ADDRESS STREET ADORESS CITY ST ZIP CHY SI 7IP THIT Delete шп ☐ Change ■ Addition NAMI NAMI STREET ADDRESS STREET ADDRESS

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12. I horeby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 early; 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.

CITY-ST 7IP

SIGNATURE

CITY S1-ZIP

PROTECTION TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date