


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 18, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # H03998</b> 1. Entity Name <b>JEM-R, INC.</b>		
Principal Place of Business <b>C/O JOHN E. MAGNER</b> <b>2667 N. OCEAN BLVD. I-509</b> <b>BOCA RATON, FL 33431</b>	Mailing Address <b>C/O JOHN E. MAGNER</b> <b>2667 N. OCEAN BLVD. I-509</b> <b>BOCA RATON, FL 33431</b>	
<h2>DO NOT WRITE IN THIS SPACE</h2>		
<div style="display: flex; justify-content: space-between;"> <span>04102008</span> <span>No Chg-P</span> <span>CR2E034 (11/05)</span> </div>		
4. FEI Number <b>59-2423685</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  <b>MAGNER, JOHN E</b> <b>2667 N. OCEAN BLVD. I-509</b> <b>BOCA RATON, FL 33431</b>		
7. 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.		<h2>DO NOT WRITE IN THIS SPACE</h2>
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		
<div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <b>FILE NOW!!! FEE IS \$150.00</b>  <b>After May 1, 2006 Fee will be \$550.00</b> </div> <div style="width: 30%;">         9. Election Campaign Financing          Trust Fund Contribution. <input type="checkbox"/> </div> <div style="width: 30%;"> <b>\$5.00</b> May Be Added to Fees       </div> </div>		
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	P <b>MAGNER, JOHN E.</b> <b>2667 N OCEAN BLVD I-501</b> <b>BOCA RATON, FL 33431</b>	
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11. 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: <u>Rosemary R. MAGNER</u> <u>Rosemary R. Magner</u> <u>4/12/06</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		

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