## 2006 FOR PROFIT CORPORATION

## **FILED** Jan 23, 2006 08:00 AN Secretary of State

DOCUMENT # J0103 1. Entity Name FJR BUSINESS SERVICES,		
Principal Place of Business	Mailing Address	y
9002 9M152NDST DXEPLAZA MAM, RL 33157	9002 SW152NDST DXEFLAZA MAM, FL 33157	
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Principal Plac 9002 SW15 DXEPLAZA MAM, FL 3	2NDST	Mailing Address 9002 SW152NDST DXEPLAZA MAM, FL 33157	*						
DO NOT WRITE IN THIS SPA		CE		01182006  4. FEI Number 59-263  5. Certificate	334 (11/05)    Applied For   Not Applicable   \$8.75 Additional   Fee Required				
	6. Name and Address of Current Regi	stered Agent			_ <del></del>				
RIEGLER, JAMES 14221 SW 92ND AVENUE MIAMI, FL 33176		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 require				required wi	d when reinstating) DATE				
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Finar     Trust Fund Contribution.		\$5.0 Added	<b>0</b> May Be I to Fees				
10.	OFFICERS AND DIRE	CTORS							
TITLE NAME STREET ADDRESS	SD RIEGLER, FILOMENA 14221 SW 92ND AVE						,	100	
TITLE NAME SIREET ACCRESS CITY-ST-ZIP	MIAMI, FL 33176 PD RIEGLER, JAMES 14221 SW 92ND AVE MIAMI, FL 33176						13441331 -80045-	018 1SO.00	
TITLE NAME SIPEET ADDRESS CITY-ST-ZIP	William, 12 33170				DO	NOT W	/RITI	· ··	
TITLE NAME SIRET ACCRESS OTY-ST-2P				٠		THIS SI		•	
TITLE NAME STREET ACCRESS		/ <del>-                                   </del>							
CITY-ST-ZIP TITLE NAME STREET ADDRESS									
12. I hereby of indicated of the cor	certify that the information supplied with this on this report or supplemental report is true poration or the receiver or trustee empowere	filling does not qualify for the exe and accurate and that my signat	emptions conture shall have	tained in	n Chapter 119 me legal effec	, Florida Statutes.	I further cer	tify that the information am an officer or director	

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: \_