

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Apr 26, 2007 8:00 am
Secretary of State

04-26-2007 90046 001 *****5.00
04-26-2007 90046 002 *****50.00

DOCUMENT # L06000088025	
1. Entity Name JRG SECURITY LLC	

Principal Place of Business 8187 NW 8 ST SUITE # 309 MIAMI FL 33126 US	Mailing Address 8187 NW 8 ST SUITE # 309 MIAMI FL 33126 US
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2. Principal Place of Business - No P.O. Box # 10143 S/W 161 AVE.	3. Mailing Address P.O. Box 522494
Suite, Apt. #, etc.	Suite, Apt. #, etc.

1st MOORE CR2E083 (10/06)

City & State MIAMI FL.	City & State MIAMI FL.
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4. FEI Number 20-5527079	Applied For <input type="checkbox"/> Not Applicable
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Zip 33196	Country	Zip 33152-2494	Country
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5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent GONZALEZ, JESUS RAMON 8187 NW 8 ST SUITE # 309 MIAMI FL 33126

7. Name and Address of New Registered Agent Name GONZALEZ JESUS RAMON Street Address (P.O. Box Number is Not Acceptable) 10143 S/W 161 AVE City MIAMI FL Zip Code 33196

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.	DATE 4-20-2007 (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2007	
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9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM GONZALEZ, JESUS RAMON 8187 NW 8 ST SUITE # 309 MIAMI FL 33126 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete

10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM GONZALEZ JESUS RAMON 10143 S/W 161 AVE. MIAMI FL. 33196 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. I hereby 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.	
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SIGNATURE:  JESUS RAMON GONZALEZ	DATE 4-20-2007	DAYTIME PHONE # 786-205-0075
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		