

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 13, 2008 8:00 am
Secretary of State

06-13-2008 90050 006 ***143.75

DOCUMENT # L07000003605 1. Entity Name JR PROPERTIES GROUP LLC					
Principal Place of Business 5562 SW 28TH TERRACE DANIA BEACH, FL 33312			Mailing Address 5562 SW 28TH TERRACE DANIA BEACH, FL 33312		
2. Principal Place of Business - No P.O. Box # 8002 SW 29th St Suite, Apt. #, etc.		3. Mailing Address 5900 STIRLING RD Suite, Apt. #, etc. BAY # 5			
City & State DAVIE FLORIDA Zip 33328		City & State HOLLYWOOD, FLORIDA Zip 33021		4. FEI Number 20-8204823	
Country BROWARD		Country BROWARD		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent CORPORATE CREATIONS NETWORK INC. 11380 PROSPERITY FARMS ROAD #221E PALM BEACH GARDENS, FL 33410				7. Name and Address of New Registered Agent --- Name DASHCOVERS PLUS DEPOT DISTRIBUTOR INC. Street Address (P.O. Box Number is Not Acceptable) 5900 STIRLING ROAD BAY # 5 City HOLLYWOOD FL Zip Code 33021	
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 <u>JANE RANDOLPH</u> <i>Jane Randolph</i> 6-9-08 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) DATE</small>					
FILE NOW!!! FEE IS \$138.75 Due by September 12, 2008		In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RANDOLPH, JANE 5562 SW 28TH TERRACE DANIA BEACH, FL 33312	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RANDOLPH, JANE 8002 SW 29th ST. DAVIE FL 33328
		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
		<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 Chapter 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.					
SIGNATURE: <u>JANE RANDOLPH</u> <i>Jane Randolph</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>				6-9-08 954-236-6575 <small>Date Daytime Phone #</small>	