2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 23, 2003 8:00 am
Secretary of State
01-23-2003 90099 045 ***150.00

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DOCUMENT # M47031

1. Entity Name
J.R. INSPECTION SERVICES, INC.

Principal Place of Business	Mailing Address
13927 VIA NIDIA DELRAY BEACH FL 33446	13927 VIA NIDIA DELRAY BEACH FL 33446

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
13032 Misty Gilbralter Way	13032 Misty Gilbralter Way
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Delray Beach, Florida	City & State: Delray Beach, Florida
Zip: 33446 Country: U.S.	Zip: 33446 Country: U.S.

4. FEI Number 59-2768283 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ROTHBERG, JEFFREY, R. SAME
13927 VIA NIDIA
DELRAY BEACH FL 33446

7. Name and Address of New Registered Agent

Name: Jeffrey R. Rothberg
Street Address (P.O. Box Number is Not Acceptable): 13032 Misty Gilbralter Way
City: Delray Beach, Florida FL Zip Code: 33446

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 required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD ROTHBERG, JEFFREY, R. SAME ~~13927 VIA NIDIA~~ ~~DELRAY BEACH FL 33446~~ ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Jeffrey R. Rothberg 13032 Misty Gilbralter Way Delray Beach, Florida 33446 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: SIGNATURE REQUIRED [signature] 1/20/03 (561) 638-1450
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #