2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 12, 2005
Secretary of State

DOCUMENT# N04000009661

Entity Name: IJRI INC.

Current Principal Place of Business:

1003 W EDGEWOOD AVE
JACKSONVILLE, FL 32208

New Principal Place of Business:

Current Mailing Address:

1003 W EDGEWOOD AVE
JACKSONVILLE, FL 32208

New Mailing Address:

FEI Number: 34-2019662 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GREEN, REGINALD BISHOP
1003 W EDGEWOOD AVE
JACKSONVILLE, FL 32208 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: GREEN, REGINALD DR
Address: 1001 N OAK ST
City-St-Zip: STARKE, FL 32091

Title: V ( ) Delete
Name: GREEN, IRMA
Address: 1001 N OAK ST
City-St-Zip: STARKE, FL 32091

Title: S ( ) Delete
Name: GREEN, RASHONDA
Address: 1001 N OAK ST
City-St-Zip: STARKE, FL 32091

Title: T ( ) Delete
Name: GREEN, JARONDA
Address: 1001 N OAK ST
City-St-Zip: STARKE, FL 32091

Title: D ( ) Delete
Name: GREEN, IVANA
Address: 1001 N OAK ST
City-St-Zip: STARKE, FL 32091

Title: D ( ) Delete
Name: INGS, JAMES
Address: 1828 DAYTONA LN N
City-St-Zip: JACKSONVILLE, FL 32218

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DR. REGINALD GREEN P 05/12/2005

Electronic Signature of Signing Officer or Director — Date