## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000004999

Entity Name: JL REALTY GROUP CORPORATION

FILED Apr 25, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
2225 VAN BUREN ST. HOLLYWOOD, FL 33020 US					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
6931 HOOE HOLLYWO	OSTREET OD, FL 33024	US			
FEI Number:	52-2211549	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
VALDES, LILIANA 6931 HOOD STREET HOLLYWOOD, FL 33024 US					
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			i	Date	
Election Campaign Financing Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () DO LOPEZ, JAIRO A 6931 HOOD STRE HOLLYWOOD, FL	EET	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () DO VALDES, LILIANA 6931 HOOD STRE HOLLYWOOD, FL	EET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () DO VALDES, LILIANA 6931 HOOD STRE HOLLYWOOD, FL	EET	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	P () DO LOPEZ, JAIRO 2225 VAN BUREN HOLLYWOOD, FL	STREET	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	P () Do LOPEZ, JAIRO 2225 VAN BUREN HOLLYWOOD, FL	STREET	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () DO VALDES, LILIANA 6931 HOOD STRE HOLLYWOOD, FL	EET	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 607, Florida Statutes; and that my name appears					

SIGNATURE: LILIANA VALDES D 04/25/2008

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