

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000033731

Entity Name: J.R. TEN, INC.

FILED
Mar 06, 2009
Secretary of State

Current Principal Place of Business:

8888 SW 136TH ST.
487
MIAMI, FL 33176

New Principal Place of Business:

Current Mailing Address:

8888 SW 136TH ST.
BAY 487
MIAMI, FL 33176

New Mailing Address:

FEI Number: 65-1038573

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TURK, HAROLD J
1428 BRICKELL AVE., MAIN FLOOR
MIAMI, FL 33131 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ELDRIDGE, KENNETH
Address: 11255 SW 93RD CT.
City-St-Zip: MIAMI, FL 33176

Title: D () Delete
Name: ELDRIDGE, DIANA
Address: 11255 SW 93RD CT.
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ELDRIDGE, KENNETH
Address: 10900 SW 69TH AVENUE
City-St-Zip: MIAMI, FL 33156

Title: D (X) Change () Addition
Name: ELDRIDGE, DIANA
Address: 10900 SW 69TH AVENUE.
City-St-Zip: MIAMI, FL 33156

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

SIGNATURE: DEBRA JENNINGS

BK

03/06/2009

Electronic Signature of Signing Officer or Director

_____ Date