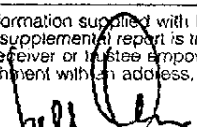


2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 12, 2006 08:00 AM
Secretary of State

DOCUMENT # P01000064272 1. Entity Name J.R. KAISER ASSET MANAGEMENT, INC.					
Principal Place of Business 520 PALM SPRINGS BLOUEVARD #609 INDIAN HARBOUR BEACH FL 32937 US			Mailing Address 520 PALM SPRINGS BLOUEVARD #609 INDIAN HARBOUR BEACH FL 32937 US		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State Zip Country			City & State Zip Country		
4. FEI Number 59-3729193				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. 1840 SOUTHWEST 22 STREET 4TH FLOOR MIAMI FL 33145			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ (NOTE: Registered Agent signature required when re-registering) _____ DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Added to Fee	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD KAISER, JUDITH 520 PALM SPRINGS BLVD., #609 INDIAN HARBOUR BEACH FL 32937	☐ Delete		☐ Change ☐ Add	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KAISER, JOEL 520 PALM SPRINGS BLVD., #609 INDIAN HARBOUR BEACH FL 32937	☐ Delete		☐ Change ☐ Add	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete		☐ Change ☐ Add	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:  JOEL KAISER 04.07.06 321.11357					



1st MOORE CR2E034 (10/05)

4. FEI Number **59-3729193**

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

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL | Zip Code

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
 Trust Fund Contribution. ☐ **\$5.00 May**
 Added to Fee

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**PSTD
KAISER, JUDITH
520 PALM SPRINGS BLVD., #609
INDIAN HARBOUR BEACH FL 32937**

☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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04/26/06-80067-008 150.00**

☐ Change ☐ Add

TITLE
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STREET ADDRESS
CITY-ST-ZIP

**D
KAISER, JOEL
520 PALM SPRINGS BLVD., #609
INDIAN HARBOUR BEACH FL 32937**

☐ Delete

TITLE
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CITY-ST-ZIP

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SIGNATURE:

JOEL KAISER

04.07.06 321.11357