

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000069884

Entity Name: JRM OF HILLSBOROUGH, INC.

FILED
Apr 03, 2007
Secretary of State

Current Principal Place of Business:

7805 PROFESSIONAL PLACE
SUITE B
TAMPA, FL 33637 US

New Principal Place of Business:

Current Mailing Address:

7805 PROFESSIONAL PLACE
SUITE B
TAMPA, FL 33637 US

New Mailing Address:

FEI Number: 59-3730115 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MAHIQUEZ, LUIS F
201 12TH AVE. E.
PALMETTO, FL 34221 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: MAHIQUEZ, LUIS F
Address: 201 12TH AVE. E.
City-St-Zip: PALMETTO, FL 34221

Title: D () Delete
Name: ROBERTSON, MARGARET A
Address: 7925 JOSHUA WOODS DR
City-St-Zip: WAKE FOREST, NC 27587

Title: D () Delete
Name: JEAN, HENRI V
Address: 530 LAFAYETTE BLVD
City-St-Zip: OLDMAR, FL 34677

Title: D () Delete
Name: KRISHNASAMY, RAJ
Address: 6895 SPIDER LILY LANE
City-St-Zip: LAKE WORTH, FL 33462

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: LUIS F. MAHIQUEZ

D

04/03/2007

Electronic Signature of Signing Officer or Director

_____ Date