

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Jun 23, 2009
Secretary of State**

DOCUMENT# P01000069886

Entity Name: MIAMI J.R. CASH, INC.

Current Principal Place of Business:

2430 N.W. 36 ST.
MIAMI, FL 33142

New Principal Place of Business:

Current Mailing Address:

2430 N.W. 36 ST.
MIAMI, FL 33142

New Mailing Address:

FEI Number: 65-1122441 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RODRIGUEZ, JHON R
17450 S.W. 22 ST.
MIRAMAR, FL 33029 US

Name and Address of New Registered Agent:

ESCOBAR, LIA S
17450 S.W. 22 ST.
MIRAMAR, FL 33029 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: LIA S. ESCOBAR

06/23/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: RODRIGUEZ, JOSE
Address: 17450 S.W. 22 ST.
City-St-Zip: MIRAMAR, FL 33029

Title: VPD () Delete
Name: ESCOBAR, LIA S
Address: 17450 SW 22 ST
City-St-Zip: MIRAMAR, FL 33029

Title: PD () Delete
Name: RODRIGUEZ, JHON R
Address: 17450 S.W. 22 ST.
City-St-Zip: MIRAMAR, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: RODRIGUEZ, JOSE (10%)
Address: 17450 S.W. 22 ST.
City-St-Zip: MIRAMAR, FL 33029

Title: PD (X) Change () Addition
Name: ESCOBAR, LIA S (80%)
Address: 17450 SW 22 ST
City-St-Zip: MIRAMAR, FL 33029

Title: VPD (X) Change () Addition
Name: RODRIGUEZ, JHON R (10%)
Address: 17450 S.W. 22 ST.
City-St-Zip: MIRAMAR, FL 33029

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: LIA S. ESCOBAR

PD

06/23/2009

Electronic Signature of Signing Officer or Director

Date