2004 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Aug 12, 2004 08:00 AM DOCUMENT # P01000086825 Secretary of State 1. Entity Name JBR INVESTMENT GROUP INC. Principal Place of Business Mailing Address 13985 SW 25TH TERR 13985 SW 25TH TERR MIAMI, FL 33175 MIAMI, FL 33175 08082004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Númber NOT APPLICABLE Not Applicable \$8.75 Additional Fee Required Certificate of Status Desired 6. Name and Address of Current Registered Agent DO NOT WRITE BARROS, JOEL 13985 SW 25TH TERR MIAMI, FL 33175 IN THIS SPACE 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. Signature, typed or printed name of registered agent and this if applicable (NOTE Registered Agen; signature required when refragating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Trust Fund Contribution. Due by September 8, 2004 Added to Fees 10. OFFICERS AND DIRECTORS SD साराह NAME BARROS, JOEL U00000169922 08/12/04-80004-005 150.00 13985 SW 25TH TERR STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33175 CD TITLE BARROS, BERNABE NAME STREET ADDRESS 13985 SW 25TH TERR CATY-ST-ZIP MIAMI, FL 33175 TITLE NAME BARROS, ROLANDO A STREET ADDRESS 13985 SW 25TH TERR DO NOT WRITE CITY-ST-ZIP MIAMI, FL 33175 TITLE IN THIS SPACE NAME. STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119,07(3)(f), 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 trusted or provided 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 addition, with all other like empowered. SIGNATURE:

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

NAME STREET ADDRESS CITY - ST - ZIP