


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005 8:00 am
Secretary of State

04-29-2005 90294 041 ***150.00

DOCUMENT # P03000072231	
1. Entity Name JR MEDICAL TECHNOLOGY, INC.	

Principal Place of Business 236 NW 60 AVENUE POMPAÑO BEACH, FL 33063	Mailing Address 236 NW 60 AVENUE POMPAÑO BEACH, FL 33063
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14011508



2. Principal Place of Business 609 S. STATE RD 7 Suite, Apt. #, etc. Apt 1H	3. Mailing Address 609 S. STATE RD 7 Suite, Apt. #, etc. Apt 1H
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04202005 Chg-P CR2E034 (10/03)

City & State Margate FL	City & State Margate FL
Zip 33068	Zip 33068
Country USA	Country U.S.A.

4. FEI Number 86-1074019	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent GAYLER, RICARDO 236 NW 60 AVENUE POMPAÑO BEACH, FL 33063

7. Name and Address of New Registered Agent Name Gailier Ricardo Street Address (P.O. Box Number is Not Acceptable) 609 South State Rd 7 Apt 1H City Margate FL Zip Code 33068
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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  DATE 04/20/05
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP GARCES, RICARDO G 236 NW 60 AVE POMPAÑO BEACH, FL 33063 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP Gailier Ricardo 609 S. State Road 7 Apt 1H Margate FL. 33068 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV RENGIFO, JAIME R 236 NW 60 AVE POMPAÑO BEACH, FL 33063 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP 609 S. State Road 7 Apt 1H Margate FL. 33068 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:  Ricardo Gailier G. 04/20/05 974.200.4431
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #