

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 17, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000095331

1. Entity Name
JBRI CORPORATION



Principal Place of Business
**9136 NW 144TH TERRACE
MIAMI LAKES, FL 33018**

Mailing Address
**9136 NW 144TH TERRACE
MIAMI LAKES, FL 33018**



07112006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0194206

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**PEREZ, RICHARD
9136 NW 144TH TERRACE
MIAMI LAKES, FL 33018**

**DO NOT WRITE
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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	PEREZ, RICHARD
STREET ADDRESS	9136 NW 144TH TERRACE
CITY-ST-ZIP	MIAMI LAKES, FL 33018
TITLE	V
NAME	PEREZ, RICHARD
STREET ADDRESS	9136 NW 144TH TERRACE
CITY-ST-ZIP	MIAMI LAKES, FL 33018
TITLE	S
NAME	PEREZ, IVONNE
STREET ADDRESS	9136 NW 144TH TERRACE
CITY-ST-ZIP	MIAMI LAKES, FL 33018
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000570760
07/18/06-80009-008 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-13-06

Date

-786-797-7262

Daytime Phone #