

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 20, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000033451

1. Entity Name

J & R HOLDINGS GROUP, INC.



Principal Place of Business

3101 NORTH STATE ROAD 7
HOLLYWOOD, FL 33021

Mailing Address

3101 NORTH STATE ROAD 7
HOLLYWOOD, FL 33021



02202006 No Chg-P CR2E034 (11/05)

4. FEI Number

47-0938186

Applied For

Not Applicable

5. Certificate of Status Oastred



\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

WILKES, JOHN P
901 SOUTH FEDERAL HIGHWAY
SUITE 101A
FORT LAUDERDALE, FL 33316

**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
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

00000033451
03/31/06-80018-002 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	OSCEOLA, JODY L
STREET ADDRESS	3001 FRANK SHORE COURT
CITY-ST-ZIP	HOLLYWOOD, FL 33024
TITLE	S
NAME	PINCKNEY, ROGER
STREET ADDRESS	3001 NORTH STATE ROAD 7, APT. #4
CITY-ST-ZIP	HOLLYWOOD, FL 33021
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**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

Date

Daytime Phone #