2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 22, 2007 8:00 am DOCUMENT # P04000042281 **Secretary of State** 02-22-2007 90026 027 ***150.00 JTJ PROPERTIES GROUP, INC. Principal Place of Business Mailing Address 2733 NE 26TH TERR. FT. LAUDERDALE FL 33306 2733 NE 26TH TERR. FT. LAUDERDALE FL 33306 2. Principal Place of Business - No P.O. Box # 1st MOORE CR2E034 (10/06) 4. FEI Number 26-0080892 Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent JARKESY, TOM 2733 NE 26TH TERR. FT. LAUDERDALE FL 33306 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 egisto ed agent. President 2-13-07 SIGNATURE led name of registered agent and title it applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee WilhBe \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Change Addition MIE ☐ Defete TITLE JARKESY, JOSEPH T Joseph T JARKesy NAME NAME **2733 NE 26 TERRACE** STREET ADDRESS 4025 N Federal Huy # 222A STREET ADDRESS FORT LAUDERDALE FL 33306 CITY - ST - ZIP CITY-ST-ZIP OAKIANS PARK, FL 33308 Delete THE HILE Change Addition JARKESY, THOMAS NAME NAME 2733 NE 26 TERRACE STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33306 CITY-ST-7IP CITY ST ZIP HILL ☐ Delete HILE Change Addition NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-SI-7/P Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Channe Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY+SI+7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-S1-7IP CITY ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 the address, with all other like empowered.

FILED