2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 29, 2008 8:00 am Secretary of State 01-29-2008 90021 008 ***150.00

DOCUMENT # P04000090538 1. Entity Name J.J. GROUP HOME.INC.					01-29-2008 9	90021 008 ***150	.00	
Principal Place	e of Business	Mailing Address		— 4 00				
1150 N.W. 130TH STREET MIAMI, FL 33168 US		1150 N.W. 130TH STREET MIAMI, FL 33168 US		 				
2. Principal Place of Business - No P.O. Box #		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01122008	Chg-P	CR2E034 (12/06)		
City & State		City & State		4. FEI Number 9 0-0198			pplied For ot Applicable	
Zíp	Country	Zip	Country		of Status Desired	S8.75 Ad Fee Require	ditional ed	
<u> </u>	6. Name and Address of Curren	t Registered Agent	Nome	7. Name and	Address of New	Registered Agent -		
JOSEPH, MARIE J			Name	Name				
726 NW 170TH STREET MIAMI, FL 33168			Street Addres	Street Address (P.O. Box Number is Not Acceptable)				
			City			FL Zip Coo	de	
the obligat	lions of registered agent. Signature, typed or printed name of registered agen	nt and title if applicable. (NO	TE: Registered Agent signature requ	uired when reinstating)		DATE		
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550	9. Election Campa Trust Fund Cor	aign Financing \$ ntribution.	\$5.00 May Be Added to Fees				
10.		i		I				
	OFFICERS AND) DIRECTORS	11.	ADDITIONS/0	CHANGES TO OF	FICERS AND DIRECTOR	RS IN 11	
THLE	Р	l_	TITLE	ADDITIONS/0	CHANGES TO OF	FICERS AND DIRECTOR	RS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP) DIRECTORS		ADDITIONS/0	CHANGES TO OF			
NAME STREET ADDRESS	P JOSEPH, MARIE J 726 NW 170TH STREET) DIRECTORS	TITLE NAME STREET ADDRESS	ADDITIONS/0	CHANGES TO OF			
NAME STREET ADDRESS CITY-ST-ZIP THLE NAME	P JOSEPH, MARIE J 726 NW 170TH STREET MIAMI, FL 33168 VP JOSEPH, JEANCLAUDE	D DIRECTORS	THLE NAME STREET ADDRESS CHY-ST-ZIP THLE NAME	ADDITIONS/0	CHANGES TO OF	☐ Change	☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP THLE NAME STREET ADDRESS	P JOSEPH, MARIE J 726 NW 170TH STREET MIAMI, FL 33168 VP JOSEPH, JEANCLAUDE 726 NW 170TH STREET	D DIRECTORS	THLE NAME STREET ADDRESS CHY-ST-ZIP THLE NAME STREET ADDRESS	ADDITIONS/0	CHANGES TO OF	☐ Change	☐ Addition	
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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: 1

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR