

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000165289

Entity Name: JRN TECHNOLOGIES, INC.

FILED  
Mar 12, 2008  
Secretary of State

## Current Principal Place of Business:

5051 STATE ROAD 7  
708  
DAVIE, FL 33314

## Current Mailing Address:

5051 STATE ROAD 7  
708  
DAVIE, FL 33314

## New Principal Place of Business:

5071 SOUTH STATE ROAD  
708  
DAVIE, FL 33314

## New Mailing Address:

5071 SOUTH STATE ROAD 7  
708  
DAVIE, FL 33314

FEI Number: 20-1994475

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NORA, MARVILLI  
5051 ST ROAD 7  
708  
DAVIE, FL 33314 US

## Name and Address of New Registered Agent:

MARVILLI, NORA  
5071 SOUTH STATE ROAD 7  
708  
DAVIE, FL 33314 US

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.

SIGNATURE: NORA MARVILLI

03/12/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D,P ( ) Delete  
Name: NORA, MARVILLI  
Address: 5051 ST ROAD 7 STE 708  
City-St-Zip: DAVIE, FL 33314

Title: D,V ( ) Delete  
Name: JOSEPH, MARVILLI  
Address: 5051 ST ROAD 7 SUITE 708  
City-St-Zip: DAVIE, FL 33314

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D,P (X) Change ( ) Addition  
Name: MARVILLI, NORA  
Address: 5071 ST ROAD 7, STE 708  
City-St-Zip: DAVIE, FL 33314

Title: D,V (X) Change ( ) Addition  
Name: MARVILLI, JOSEPH  
Address: 5071 SOUTH STATE ROAD 7, SUITE 708  
City-St-Zip: DAVIE, FL 33314

Title: D,V ( ) Change (X) Addition  
Name: SCHLEIEN, MICHAEL  
Address: 5071 SOUTH STATE ROAD 7, SUITE 708  
City-St-Zip: DAVIE, FL 33314

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NORA MARVILLI

DIR

03/12/2008

Electronic Signature of Signing Officer or Director

Date