

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000041388

Entity Name: JNR CONTRACTORS, CORP

FILED  
Sep 19, 2007  
Secretary of State

## Current Principal Place of Business:

1665 S KIRKMAN ROAD  
158  
ORLANDO, FL 32811 US

## Current Mailing Address:

1665 S KIRKMAN ROAD  
158  
ORLANDO, FL 32811 US

## New Principal Place of Business:

1665 S KIRKMAN ROAD  
UNIT 158  
ORLANDO, FL 32811 US

## New Mailing Address:

1665 S KIRKMAN ROAD  
UNIT 158  
ORLANDO, FL 32811 US

FEI Number: 20-2538087

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ACCOUNT BOOKKEEPING CORP  
5950 LAKEHURST DR  
SUITE 246  
ORLANDO, FL 32819 US

## Name and Address of New Registered Agent:

LARSON ACCOUNTING AND CONSULTING SVC, LLC  
8818 COMMODITY CI  
SUITE 40  
ORLANDO, FL 32819 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: CAROLINE LARSON

09/19/2007

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: FIDELIS, JOAO B  
Address: 1665 S KIRKMAN ROAD APT 158  
City-St-Zip: ORLANDO, FL 32811 US

Title: VP ( ) Delete  
Name: FIDELIS, NEILA  
Address: 1665 S KIRKMAN ROAD APT 158  
City-St-Zip: ORLANDO, FL 32811 US

Title: S (X) Delete  
Name: TEMPONI, MARCUS  
Address: 1665 S KIRKMAN ROAD APT 158  
City-St-Zip: ORLANDO, FL 32811 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JOAO B FIDELIS

P

09/19/2007

Electronic Signature of Signing Officer or Director

Date