2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P05000150260

1. Entity Name



FILED Jan 30, 2007 8:00 am Secretary of State

J & R PROPERTY SERVICES, INC. Principal Place of Business Mailing Address գկկսսս. 2279 SEMINOLE ROAD 2279 SEMINOLE ROAD STE 6 STE 6 ATLANTIC BEACH, FL 32233 ATLANTIC BEACH, FL 32233 2. Principal Place of Business - No P.O. Box.# 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01242007 CR2E034 (12/06) City & State Applied For City & State Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BREITBART, JERRE G 2279 SEMINOLE ROAD Street Address (P.O. Box Number is Not Acceptable) STE 6 ATLANTIC BEACH, FL 32233 Zip Code 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, typed or printed name of registered agent and tide if applicable. DATE (NOTE: Registered Agent signature regulated when reinstaung) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. P, T ☐ Delete TITLE TITLE ☐ Change ☐ Addition BREITBART, JERRE NAME NAME STREET ADDRESS 2279 SEMINOLE ROAD, STE 6 STREET ADDRESS ATLANTIC BÉACH, FL 32233 CITY-ST-ZIP CHY-ST-ZIP V, S ☐ Delete TITLE Change Addition TITLE BREITBART, RICHARD L NAME NAME 2279 SEMINOLE ROAD, STE 6 STREET ADDRESS STREET ADDRESS CITY - ST- ZIP CITY-ST-ZIP ATLANTIC BEACH, FL 32233 Change Addition ___Delete TITLE TILLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP THE ☐ Delete TITLE [] Change Addition NAME NAME

12. Thereby 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 tristee 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

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