## 2068 FOR PROFIT CORPORATION **ANNUAL REPORT**

## **FILED** Apr 21, 2008 08:00 A Secretary of State **DOCUMENT # P06000050305** 1. Entity Name J.R.L. LENDING GROUP INC. Principal Place of Business Mailing Address 1108 S. FLORIDA AVE. 1108 S. FLORIDA AVE. TARPON SPRINGS, FL 34689 TARPON SPRINGS, FL 34689 No Chg-P CR2E034 (11/05) 04152008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 56-2573058 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ANNEXY, JORGE DO NOT WRITE 1108 S. FLORIDA AVE TARPON SPRINGS, FL 34689 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title it applicable \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE NAME ANNEXY, JORGE STREET ADDRESS 1108 S. FLORIDA AVE CITY-ST-ZIP TARPON SPRINGS, FL 34689 TITLE HYLTON, REX NAME STREET ADDRESS 2101 SANDPIPER POINTE CT. CITY-ST-ZIP TARPON SPRINGS, FL 34689 TITLE NAME ANNEXY, LYDIA STREET ADDRESS 2101 SANDPIPER POINTE CT DO NOT WRITE CITY-ST-ZIP TARPON SPRINGS, FL 34689 TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby 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 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:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO