

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000119613

Entity Name: J.S.R. VENTURES, INC.

FILED
May 01, 2008
Secretary of State

Current Principal Place of Business:

5639 SABAL TRACE DR
NORTH PORT, FL 34287

New Principal Place of Business:

1805 FAUST DRIVE
ENGLEWOOD, FL 34224

Current Mailing Address:

5639 SABAL TRACE DR
NORTH PORT, FL 34287

New Mailing Address:

2828 S.MCCALL ROAD
#232 PMB 36
ENGLEWOOD, FL 34224

FEI Number: 22-3943360

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

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:

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: PSTD () Delete
Name: REDDING, JAMIE S
Address: 5639 SABAL TRACE DR
City-St-Zip: NORTH PORT, FL 34287

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: REDDING, JAMIE S
Address: 2828 S.MCCALL ROAD #232 PMB 36
City-St-Zip: ENGLEWOOD, FL 34224

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: JAMIE S. REDDING

PSTD

05/01/2008

Electronic Signature of Signing Officer or Director

Date