

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000026379

Entity Name: R S JUNTO, INC.

FILED
Apr 15, 2009
Secretary of State

Current Principal Place of Business:

11209 SW 117 CT
MIAMI, FL 33186 US

New Principal Place of Business:

Current Mailing Address:

11209 SW 117 CT
MIAMI, FL 33186 US

New Mailing Address:

FEI Number: 26-2160762

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSE, MARLENE
11209 SW 117 CT
MIAMI, FL 33186 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: ROSE, KEEBLE
Address: 11209 SW 117TH CT
City-St-Zip: MIAMI, FL 33186 US

Title: SD () Delete
Name: ROSE, MARLENE
Address: 11209 SW 117 CT
City-St-Zip: MIAMI, FL 33186 US

Title: PD () Delete
Name: SAMUELS, BLESTON
Address: 897 FORDING ISLAND ROAD APT 805
City-St-Zip: BLUFFTON, SC 29910 US

Title: D () Delete
Name: CLARKE, ETHNIE
Address: 620 SW 111TH AVE APT 303
City-St-Zip: PEMBROKE PINES, FL 33025 US

Title: D () Delete
Name: VINCENT, KIRK
Address: 4191 NW 26TH ST APT 154
City-St-Zip: LAUDERHILL, FL 33313 US

Title: D (X) Delete
Name: ROCHESTER, GEORGE
Address: 11209 SW 117TH CT
City-St-Zip: MIAMI, FL 33186 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: PD (X) Change () Addition
Name: SAMUELS, BLESTON
Address: 22 SAGO PALM DRIVE
City-St-Zip: BLUFFTON, SC 29910 US

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

Title: D (X) Change () Addition
Name: WILLIAMS, KEVON
Address: 22 SAGO PALM DRIVE
City-St-Zip: BLUFFTON, SC 29910

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: KEEBLE ROSE

TD

04/15/2009

Electronic Signature of Signing Officer or Director

Date