Amended 2003

01-23-2003 90130 003 ****70.00
FILE P93000048016

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 04, 2003 8:00 A.M.
Secretary of State

DOCUMENT # P93000048016

1. Entity Name: JRF INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1144 S. Andrews Ave	1144 S. Andrews Ave
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Ft Lauderdale Fl	City & State: Ft Lauderdale Fl
Zip: 33316 Country: USA	Zip: 33316 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-04227-57 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: James R Fatout

Street Address (P.O. Box Number is Not Acceptable): 15110 n Longbow Bend

City: Davie FL Zip Code: 33331

6. 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: James R Fatout 2/9/03
Signature, type or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Date

January 1 - May 1 Fee is $150.00
After May 1 Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P/T
NAME	James R Fatout
STREET ADDRESS	15110 n Longbow Bend
CITY-ST-ZIP	Davie FL 33331
TITLE	V
NAME	Mary E Fatout
STREET ADDRESS	15110 n Longbow Bend
CITY-ST-ZIP	Davie FL 33331
TITLE	S
NAME	Sarah T. Ruiter
STREET ADDRESS	117 Lk Emerald Dr #204
CITY-ST-ZIP	Oakland Pk FL 33309
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CR2E034B (12/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 on an attachment with an address, with all other like empowered.

SIGNATURE: James R Fatout 2/9/03 954 763 1977
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR Date Daytime Phone #

2/4/03 aw