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Apr 07 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000016092 (6)

1. Corporation Name:

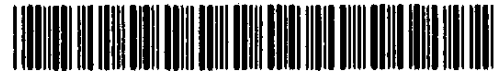
J.R. INVESTMENTS REALTY, INC.

Principal Place of Business

12700 BISCAYNE BLVD
SUITE 305
N MIAMI FL 33181

Mailing Address

P.O. BOX 601334
NORTH MIAMI BEACH FL 33160-1334



3. Date Incorporated or Qualified
02/25/1994

3a. Date of Last Report
06/17/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

4. FEI Number

65-0480303

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

ROMERO, JUAN
12700 BISCAYNE BLVD.
SUITE 305
NORTH MIAMI BEACH FL 33181

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE:

Signature: Typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PDCM
NAME ROMERO, JUAN
STREET ADDRESS 12700 BISCAYNE BLVD SUITE 305
CITY- ST- ZIP N MIAMI FL 33181

TITLE TD
NAME WALL, MARIA C
STREET ADDRESS 12700 BISCAYNE BLVD., STE 305
CITY- ST- ZIP N MIAMI FL

TITLE SD
NAME COLLINS, MARIA
STREET ADDRESS 12700 BISCAYNE BLVD SUITE 305
CITY- ST- ZIP N MIAMI FL 33181

TITLE CD
NAME VILAR, MARIA
STREET ADDRESS 21185 HELMSMAN DR. #G-14
CITY- ST- ZIP AVENTURA FL 33180

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP

2.1 TITLE TD
2.2 NAME COLLINS MARIA
2.3 STREET ADDRESS 12700 Biscayne Blvd Ste 305
2.4 CITY- ST- ZIP N Miami FL 33181

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP

4.1 TITLE CD
4.2 NAME ROMERO JUAN
4.3 STREET ADDRESS 12700 Biscayne Blvd Suite 305
4.4 CITY- ST- ZIP N Miami FL 33181

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)