

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 11 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000016092 (6)
 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 33168
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 02/25/1994		4. FEI Number 65-0480303		Applied For <input type="checkbox"/> Not Applicable
2. Principal Place of Business	2a. Mailing Address	5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees
22. City & State	27. City & State	8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30.		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
23. Zip	28. Country	29. Zip		30. Country

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
ROMERO, JUAN 12700 BISCAYNE BLVD. SUITE 305 NORTH MIAMI BEACH FL 33181		81. Name	85. Zip Code
		82. Street Address (P.O. Box Number is Not Acceptable)	
		83.	
		84. City	FL

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROMERO, JUAN	1.2 NAME	
STREET ADDRESS	12700 BISCAYNE BLVD SUITE 305	1.3 STREET ADDRESS	
CITY-ST-ZIP	N MIAMI FL	1.4 CITY-ST-ZIP	
TITLE	TD <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WALL, MARIA C	2.2 NAME	ROMERO, JUAN
STREET ADDRESS	12700 BISCAYNE BLVD., STE 305	2.3 STREET ADDRESS	12700 Biscayne Blvd. Ste #305
CITY-ST-ZIP	N MIAMI FL	2.4 CITY-ST-ZIP	N. MIAMI, FL 33181
TITLE	SD <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COLLINS, MARIA	3.2 NAME	ROMERO, JUAN
STREET ADDRESS	12700 BISCAYNE BLVD SUITE 305	3.3 STREET ADDRESS	12700 Biscayne Blvd Ste #305
CITY-ST-ZIP	N MIAMI FL 33181	3.4 CITY-ST-ZIP	N. miami, FL 33181
TITLE	CD <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VILAR, MARIA	4.2 NAME	ROMERO, JUAN
STREET ADDRESS	21165 HELMSMAN DR. #G-14	4.3 STREET ADDRESS	12700 Biscayne Blvd Ste #305
CITY-ST-ZIP	AVENTURA FL 33180	4.4 CITY-ST-ZIP	N. Miami, FL 33181
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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 a 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 in any attachment with an address.

SIGNATURE:  CD
 JUAN ROMERO 4/23/98 (305) 899-0552

CR2E034 (10/97)