

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 23, 2004 8:00 am
Secretary of State

01-23-2004 90016 014 ***150.00

DOCUMENT # P94000072872	
1. Entity Name	
GROUP JTS INC	

DO NOT WRITE IN THIS SPACE

24003687

2. Principal Place of Business 10272 CAYMAN ST		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State COOPER CITY, FL		City & State	
Zip 33026	Country US	Zip	Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0525230		Applied For <input checked="" type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE	7. Name and Address of Current Registered Agent		
	Name		
	Street Address (P.O. Box Number is Not Acceptable)		
	City FL	Zip Code	

8. 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

Signature, typed 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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS				11.	
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME
	PRESIDENT SECRETARY	JOSEPH TACHER	3893 FALCON RIDGE CIRCLE		
		FT LAUDERDALE FL 33331			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME
	VP	VICTOR TACHER	10272 CAYMAN ST		
		COOPER CITY FL 33026			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME
	T	SARA TACHER	3893 FALCON RIDGE CIRCLE		
		COOPER CITY FL 33331			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME

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IN THIS SPACE**

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:

Joseph Tacher

Joseph Tacher President

1/19/2004

(954) 437-1427

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #