

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

200

FILED
Apr 15, 2003 8:00 am
Secretary of State

04-15-2003 90115 012 ***150.00

DOCUMENT # P97000028555
1. Entity Name
J.N.R GROUP, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 10 Fairway Drive Suite, Apt. #, etc. 202		3. Mailing Address 10 Fairway Drive Suite, Apt. #, etc. 302	
City & State Deerfield Beach, FL		City & State Deerfield Beach, FL	
Zip 33441	Country USA	Zip 33441	Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0756711	Applied For 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 Rafi Rubinez
Street Address (P.O. Box Number is Not Acceptable) 10 Fairway Drive Suite 302
City Deerfield Beach
State FL
Zip Code 33441

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.

SIGNATURE Hail [Signature] Rafi Rubinez DATE _____
Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P Rafi Rubinez 10 Fairway Drive Suite 302 Deerfield Beach, FL 33441	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Y Jack Alfasi 10 Fairway Drive Suite 302 Deerfield Beach, FL 33441	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Hail [Signature] Rafi Rubinez Date: 12/13/02 Daytime Phone #: 954-571-0280
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034B (12/01)