2007 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 30, 2007 08:00 A Secretary of State DOCUMENT # P98000107070 J.M.R.E. INVESTMENTS, INC. Principal Place of Business Mailing Address 4310 SW 156 PL. 4310 SW 156 PL. MIAMI, FL 33185 MIAMI, FL 33185 03062007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number NOT APPLICABLE Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SANCHEZ, JORGE DO NOT WRITE 4310 SW 156 PL. MIAMI, FL 33185 IN THIS SPACE 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, typed or printed name of registered agent and little if applicable DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. PTSD TITLE NAME SANCHEZ, JORGE STREET ADDRESS 4310 SW 156 PL. U00000747105 05/17/07-80013-011 150.00 MIAMI, FL 33185 CITY-ST-7IP TITLE SANCHEZ, MARTA NAME STREET ADDRESS 4310 SW 156 PL. CITY-ST-ZIP MIAMI, FL 33185 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 2

TITLE

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNAN OFFICER OR DIREC

Force Sport

301-228-24

FILED

Daytime Phone #