2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE: <u></u>

Feb 16, 2007 8:00 am Secretary of State DOCUMENT # P99000024309 1. Entity Name 02-16-2007 90044 033 ***150.00 JR ENGINEERING ENTERPRISES, INC. Principal Place of Business Mailing Address 326FRANCÍS TERRACE 701 JARVIS ST PORT CHARLOTTE FL 33948 DAYTONA BEACH FL 32118 2. Principal Place of Business - No P.O. Box # 3. Mailing Address FRANCES Suite, Apt. #, etc. Suite, Apt. #, etc CR2E034 (10/06) 326 FRANCE 3572706 Applied For City & State City & Stato Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required PhUS)A: 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ROSSMAN, JACK Street Address (P.O. Box Number is Not Acceptable) 701 JARVIS ST 326 FRANCES JERRACE PORT CHARLOTTE FL 339487 City 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 registeron agent assign SIGNATURE (NOTE Registered Agent signature required when reinstating) re-stered agent and little r applicat FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10 OFFICERS AND DIRECTORS IIILE ШЕ Delete Addition ROSSMAN, JACK NAMI NAME 701 JARVIS ST STREET ADDRESS STREET ADDRESS PORT CHARLOTTE FL 33948 CITY ST 7IP CHY ST ZIP TITLE Defete ☐ Change Addition ROSSMAN, JACK NAME NAME 701 JARVIS ST STREET LADDOESS STREET ADDRESS PORT CHARLOTTE FL 33948 CHY SI-7IP CHY-ST-7IP TITLE Delete BIR ☐ Change Addition NAME NAMI STREET ADDRESS STREET ADDRESS CITY ST 7IP CRY ST 7IP nnr Delete One ☐ Change ___ Addition NAME STRILL (ADDITESS STREET ADDRESS CHY SI 7IP CHY SI-ZIP ☐ Delete ши ши Change ☐ Addition NAMÉ NAM STREET ADDRESS STREET ADDRESS CITY S1-7IP CHY SEZIP ☐ Delete Addition NAME STREET ADDRESS STREET ADDRESS CITY ST-ZIP CITY ST-7IP 12. I heroby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 regerver 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 attagrament with an address, with all other like empowered.

FILED