FILED
May 01, 2002 8:00 am
Secretary of State
05-01-2002 91528 047 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000044058

1. Entity Name
J+R MANAGEMENT SERVICES, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
9351 NW 19 PLACE
Suite, Apt. #, etc.

3. Mailing Address
9351 NW 19 PLACE
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State: SUNRISE, FL.
Zip: 33322 Country: USA

City & State: SUNRISE, FL
Zip: 33322 Country: USA

4. FEI Number: 65-0916657 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
Name: ROBIN M BROWN
Street Address (P.O. Box Number is Not Acceptable): 9351 NW 19 PLACE
City: SUNRISE FL Zip Code: 33322

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: Robin M Brown 4/17/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☑

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 ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PRES.
NAME	ROBIN M BROWN
STREET ADDRESS	9351 NW 19 PLACE
CITY-ST-ZIP	SUNRISE, FL. 33322
TITLE	VICE PRESIDENT, SECRETARY
NAME	JOHN A BROWN
STREET ADDRESS	9351 NW 19 PLACE
CITY-ST-ZIP	SUNRISE, FL. 33322

DO NOT WRITE IN THIS SPACE

CR2E034B (12/01)

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Robin M Brown 4/17/02 954-741-2256
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #