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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
Division OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name

S46494

(8)

J.R. GROUP, INC.

9 ·11· Q										
Principal Place o	of Business	 М.	ailing Address						OLDIA OLEM EI	(B)(818)(918)(188)
201 S BISCAYNE BLVD SUITE 1402 MIAMI FL 33131			201 S BISCAYNE BLVD SUITE 1402 MIAMI FL 33131							
							3. Date Incorporated or Qualified 04/17/1991		of Last R 05/01/1	
2. Prinopal Plac	ce of Business	2a. 26	Mailing Address				4. FEI Number 65-0255301		j	Applied For Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75	Additional Required
City & State		28	City & State				Election Campaign Financing Trust Fund Contribution			0 May Be
<i>2</i> φ	Country 25	29	Zip	30	intry		8. This corporation has liability for i			
· I	9. Name and Address of Currer		tered Agent	[30]	Γ		10. Name and Address of New R	<u> </u>	Agent	
	er delt sak i konsigner om og sidde faker skompe promper i konsister om en ogger y er eg i juggigg og eg eg eg I	<u></u> .			81	Name		-5.0.0,00		
MACAU	JLEY, ROBERT B.					Ca-c-a A dal	(C) Down by probable Association	(
	BISCAYNE BLVD				82	Street Add	ress (P.O. Box Number is Not Acceptab	0)		
SUITE 1402					83			***************************************		
MIAMI FL 33131					84	City			les l Zi	io Codo
						•		FL	. ` `	ip Code
or registere familiar with SIGNATURE.	d agent, or both, in the State of Flori , and accept the obligations of, Sect	da. Such ion 607.	i change was authoriz 0505, Florida Statutes	e d by the c i.	corpo	oration's boa	ration submits this statement for the pur and of directors. Thereby accept the appo	oose of cha intment as	inging its r registered	egistered office Lagent. Lam
12.	Ignature Typod or printed name of registered agent OFFICERS AN			TE flegistered	Agen	signature require	ad when renstating)	DATE OF DO AND	NDEOTO	SEIO IN 16
TLE	DPS	L7 L7II YU.Y.	DECETE	111	iii E		ADDITIONS/CHANGES TO OFFI		Change	Add tion
IAME	ROSENKRANTZ, JOSE		L	12 N/				L		
STREET ADDRESS	201 S BISCAYNE BLVD 14	02				ADDRESS				
CHTY-ST-ZIP	miami fl.			1401						
TLE	AS		DELETE	2 1 1	I, LE				Change	Addition
IAME	MACAULAY, ROBERT			22 N/	AME					
STREET ADDRESS	201 S. BISCAYNE BLD 140)2		2351	REET	ADDRESS				
CITY - ST - ZIF	MIAMI FL			240		r-zip				·
ITLE			DELETE	3 1 10		i		[Change	☐ Addition
IAME				3 2 N/						
TREET ADDRESS						ADDRESS		··· (
OTY - ST-ZIP ITLE		re	[] DELETE	3 4 C ¹		·	50000183 -05/22/96011	100'	U Change	Addition
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CITY-S1-ZIP				4.4 CI						i
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IAME				5.2 NA	ME					
STREET ADDRESS				5.3 \$1	REET	ADDRESS		t.		
DITY-ST-ZIP				5.4 CI	17-81	1 - ZIP	<u> </u>	V		
TILE			DELETE	6. 1 TI	TLE		~ · ·	` [Change	☐ Addition
IAME				6.2 NA			$O_{h_{\lambda}^{\prime}}$			
STREET ADDRESS						ADDRESS	* ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '			
itr-st-zie	certify that the information sumplied	with this	filma is voluntarily furo	6.4 CI			for the exemption stated in Section 119.	17(3)(L) E>	rida Statut	tae I further
certify that t path; that I a	he iniomhation indicated on this anni	ual repor Fration or	t or supplemental ann : the receiver or trust e	ual report i: e empower	s tru	e and accura	ate and that my signature shall have the is report as required by Chapter 607, Flo	same legal.	effect as if	f made under - I

SIGNATURE

Robert B. Macaulay Robert B. Macaulay
NATURE AND TYPED OR PRINTED NAME OF FIGHING OFFICER OF DIRECTOR

4/30/96

305-358-9200

Daytimo Phone #

;R2E034 (12/95)