

A. Ralph Mollis, Secretary of State Corporations Division 1 18 W. River Street Providence, Rt 02904-2615 401.222,3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR ______ 2011 Filing Period: January 1 - March 1 • Filing Fee: \$50.00* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

1. Corporate ID No. 149505	2. Name of Corporation						
148595	JADR LTD						
3. Street Address Principal Business Office PO BOX 701			EAST GREENWICH	RI	02818		
4 Business Phone No 5. State of Incorporation RHODE ISLAND			•		201		
6. Brief Description of the Character of	of Business Conduc	ted in Rhode Island			3		
7. NAMES AND ADDRESSES President Name	OF THE OFFI	CERS: ("X" BOX FOR ATTA	CHMENT) T FILL IN SPACE Vice President Name	ES BEFORE USING	the state of the s		
JOHN DERUGERIS							
Street Address 17715 GULF BLVD UNIT #302			Street Address				
REDINGTON SHORES	State FL	^{Zip} 33708	City	State	∞ m		
Sceretury Name			Treasurer Name JOHN DERUGERIS				
Street Address			Street Address 17715 GULF BLVD UNIT #302				
City	State	Zip	City REDINGTON SHORES	State FL	^{Zip} 33708		
8. NAMES AND ADDRESSES Director Name JOHN DERUGERIS	OF THE DIRE	CTORS: ("X" BOX FOR ATI	ACHMENT) FILL IN SPA	CES BEFORE USING	G ATTACHMENTS		
Street Address 17715 GULF BLVD UNIT #302			Street Address				
City REDINGTON SHORES	State FL	Ζιφ 33708	City	State	Z(p		
Director Name			Director Name		•••••		
Street Address			Street Address				
City	State	Zip	City	State	Zip		
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED				
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			Number of Shares	Class/Series	Par Value		
			500	COMMON	NPV		
This report must be executed this report must be executed		• •	d representative. If the corpor or trustee.	ration is in the hands	s of a receiver or trustee.		

File Date	FILED
Check No.	MAR 3 1 2011
By:	a 141648
BY_,	FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury,	I declare and affirm that	I have examin	ed this report,				
including any accompany	ing schedules and statem	ents, and that	all statements				
contained herein are true	and comect.	(ſ				
Jala 1	If feel like	3/1	1/2/11				
Signatura		Date					
JOHN DERUGERIS							
Print or Type Name							
PRESIDENT							
Title			_				