2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

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Jul 25, 2006 8:00 am Secretary of State **DOCUMENT # L05000068394** 1. Entity Name J.P.A. INVESTMENT GROUP, LLC 03-22-2006 90286 025 ****50.00 Principal Place of Business Mailing Address 600 1ST AVENUE N STE 302 600 1ST AVENUE N ST PETERSBURG, FL 33701 ST PETERSBURG, FL 33701 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07132006 Chg-LLC CR2E083 (11/05) 4. FEI Number 20-3163695 City & State City & State Applied For Not Applicable Zin Country Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent JOE VILLARI VILLARI, JOSEPH Street Address (P.O. Box Number is Not Acceptable) 4201 POINSETTIA DR ST PETERSBURG, FL 33706 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Make check payable to Filing Fee is \$50.00 Due by September 6, 2006 Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. MGR TITLE Delete TILLE ☐ Change Addition VILLARI, JOSEPH NAME NAME STREET ADDRESS 4201 POINSETTIA DRIVE STREET ADDRESS ST PETERSBURG, FL 33706 C/TY-51-24P CT1Y-51-70 MGRM TITLE Delete TITLE ☐ Change ☐ Addition NAME DONALD, ALVAN NAME STREET ADDRESS 3127 50TH ST N STREET ADDRESS CITY-ST-ZIP ST PETERSBURG, FL 33710 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition HASELHOFF, PETER NAME NAME STREET ADDRESS 3137 TEAL TERRACE STREET ADDRESS SAFETY HARBOR, FL 33695 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-74P CITY-ST-ZIP ☐ Addition ☐ Delete ☐ Change TITLE TILLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP 11. I hereby 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver of trustee empowered to execute this report as required by Chapter 608, Florida Statutes. 7/14/00 (727)822-038 SIGNATURE: SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

FILED

ATTACHMENT 30012178 #L02000068394

July 19, 2006

To Whom It May Concern:

Please allow this 2006 annual report to be replacement for the previous report filed, as we accidentally forgot the FEI Number.

Thank you,

Joseph Villari