

PO2000121006

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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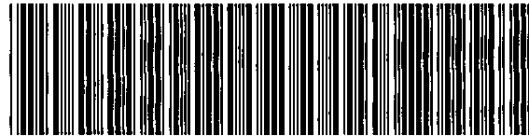
(Business Entity Name)

(Document Number)

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10 AUG 20 AM 11:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B.J. ALAN COMPANY

Distributors of Phantom® and Wolf Pack® Brand Fireworks

Corporate Office:

555 Martin Luther King, Jr. Blvd.
Youngstown, Ohio 44502-1102

Anthony Donofrio, Deputy General Counsel

Phone: 330-746-1064

Fax: 330-746-4410

Web Site: www.fireworks.com

E-Mail: Adonofrio@fireworks.com

August 19, 2010

AMENDMENT SECTION

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Dear Amendment Section:

Enclosed herewith please find "A Statement Of Change Of Registered Office Or Registered Agent Or Both For Corporations" for each of the following corporations:

Phantom of Brevard, Inc.
Phantom of Clearwater, Inc.
Phantom of Daytona, Inc.
Phantom of Jacksonville, Inc.
Phantom of Key Largo, Inc.
Phantom of St. Augustine, Inc.
Sunburst of West Palm Beach, Inc.

Attached to each statement for the above-noted corporations is a check payable to Florida Department of State in the amount of THIRTY FIVE DOLLARS (\$35.00) for the filing fees.

If there is anything else that you may need in connection with these filings, please do not hesitate to contact me at your convenience.

Thanking you, I am

Very truly yours,



ANTHONY DONOFRIO
Deputy General Counsel

AD:ke
encl.

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Phantom of Brevard, Inc.
Name of Corporation

DOCUMENT NUMBER: P02000121006

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

William A. Weimer, Vice President and General Counsel
Name of Contact Person

Phantom of Brevard, Inc.
Firm/Company

555 Martin Luther King, Jr., Blvd.
Address

Youngstown, Ohio 44502-1102
City/State and Zip Code

Waweimer@fireworks.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

William A. Weimer at (330) 746-1064
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Phantom of Brevard, Inc.
2. The principal office address: 2822 Forest Hill Blvd., West Palm Beach, Florida 33406
3. The mailing address (if different): 555 Martin Luther King, Jr., Blvd.,
Youngstown, Ohio 44502-1102
4. Date of incorporation/qualification: 10/29/2002 Document number: P02000121006

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Nancy G. Farage (Resigned)

Tampa Theater Building

707 North Franklin Street, 4th Floor

Tampa, Florida 33602

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Ira Schwartz

2822 Forest Hill Blvd.

P.O. Box NOT acceptable

West Palm Beach, Florida 33406

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.



Signature of an officer or director

William A. Weimer, Secretary

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.



Signature of Registered Agent

8-13-10

Date

If signing on behalf of an entity:

Ira Schwartz

Typed or Printed Name

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

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10 AUG 20 AM 10:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA