2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2006
Secretary of State

DOCUMENT# P03000099172

Entity Name: J STAR CONSULTING, INC.

Current Principal Place of Business:

240 SAN NICOLAS WAY
ST. AUGUSTINE, FL 32080

New Principal Place of Business:

920 FAVER DYKES ROAD
ST. AUGUSTINE, FL 32086

Current Mailing Address:

240 SAN NICOLAS WAY
ST. AUGUSTINE, FL 32080

New Mailing Address:

920 FAVER DYKES ROAD
ST. AUGUSTINE, FL 32086

FEI Number: 57-1187049 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEON, LISA M
LEON LAW OFFICE, P.A.
5095 MARINE STREET
ST. AUGUSTINE, FL 32086 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete
Name: WATSON, NILA I PRES
Address: 240 SAN NICOLAS WAY
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: CEO ( ) Delete
Name: WATSON, JIMMY R CEO
Address: 240 SAN NICOLAS WAY
City-St-Zip: SAINT AUGUSTINE, FL 32080

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: WATSON, NILA I PRES
Address: 920 FAVER DYKES ROAD
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: CEO (X) Change ( ) Addition
Name: WATSON, JIMMY R CEO
Address: 920 FAVER DYKES ROAD
City-St-Zip: SAINT AUGUSTINE, FL 32086

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NILA I WATSON PRES 02/15/2006

Electronic Signature of Signing Officer or Director — Date