2005 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 28, 2005 8:00 am Secretary of State **DOCUMENT # P04000010030** 1. Entity Name 01-28-2005 90018 007 ***150.00 J & B TRADERS, INC. ing the light of the term of term of term of the term of term Principal Place of Business Mailing Address 3236 1ST ROAD 3236 1ST ROAD VERO BEACH, FL 32968 VERO BEACH, FL 32968 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01262005 Chg-P CR2E034 (10/03) 4. FEI Number Applied For City & State City & State 20-0582178 Not Applicable Zio Country Zio Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HALL, CONNIE J Street Address (P.O. Box Number is Not Acceptable) 3236 1ST ROAD VERO BEACH, FL 32968 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE Change Addition HALL, JACK W JR. NAME NAME STREET ADDRESS STREET ADDRESS 3236 1ST ROAD CITY-ST-ZIP CITY - ST-ZIP VERO BEACH, FL 32968 T,S ☐ Delete TITLE ☐ Change ☐ Addition HALL, CONNIE J NAME NAME STREET ADDRESS 3236 1ST ROAD STREET ADDRESS VERO BEACH, FL 32968 CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Connie J.

SIGNATURE:

FILED