2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000169896

Entity Name: PJA-USA, INC.

FILED Apr 25, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2472 CYPRESS SPRINGS RD. 5321 COUNTY ROAD 352

ORANGE PARK, FL 32073 KEYSTONE HEIGHTS, FL 32656

Current Mailing Address: New Mailing Address:

2472 CYPRESS SPRINGS RD. 5321 COUNTY ROAD 352

ORANGE PARK, FL 32073 KEYSTONE HEIGHTS, FL 32656

FEI Number: 20-2058568 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HASKINS, PAMELA HASKINS, PAMELA

2472 CYPRESS SPRINGS RD. 5321 COÚNTY ROAD 352
ORANGE PARK, FL 32073 US KEYSTONE HEIGHTS, FL 32656 US

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: PAMELA HASKINS 04/25/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/P () Delete Title: D/P (X) Change () Addition Name: HASKINS, PAMELA J Name: HASKINS, PAMELA J

Name:HASKINS, PAMELA JName:HASKINS, PAMELA JAddress:2472 CYPRESS SPRINGS RD.Address:5321 COUNTY ROAD 352City-St-Zip:ORANGE PARK, FL 32073City-St-Zip:KEYSTONE HEIGHTS, FL 32656

Title: D () Delete Title: D (X) Change () Addition

Name:HASKINS, MICHAEL EName:HASKINS, MICHAEL EAddress:2472 CYPRESS SPRINGS RD.Address:5321 COUNTY ROAD 352City-St-Zip:ORANGE PARK, FL 32073City-St-Zip:KEYSTONE HEIGHTS, FL 32656

I hereby certify that the information supplied with this filing does not qualify 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: PAMELA HASKINS P 04/25/2007