2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000038791

Entity Name: J & J UNITED BEVERAGES INC.

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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4399 NW 85 TH WAY 610 LARAMIE LANE

CORAL SPRINGS, FL 33065 US GLENVIEW, IL 60025 US

Current Mailing Address: New Mailing Address:

4399 NW 85 TH WAY 610 LARAMIE LANE

CORAL SPRINGS, FL 33065 US GLENVIEW, IL 60025 US

FEI Number: 20-2488974 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:

THOMAS, JOSE CPA

12839 NW 18 COURT

PEMBROKE PINES, FL 33028 US

EATON, TIFFANY J ESQ.

225 SOUTH 21ST AVENUE

HOLLYWOOD, FL 33020 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: TIFFANY J. EATON 04/29/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: D (X) Change () Addition Name: ONISSERIL, JOSEPH Name: CHERIAN, GEEVARGHESE

 Address:
 4399 NW 85 TH WAY
 Address:
 610 LARAMIE LANE

 City-St-Zip:
 CORAL SPRINGS, FL 33065 US
 City-St-Zip:
 GLENVIEW, IL 60025 US

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

 Name:
 PUTHUSSERIL, JASMINE
 Name:
 PUTHUSSERIL, JASMINE

 Address:
 610 LARAMI LN
 Address:
 610 LARAMIE LANE

 City-St-Zip:
 GLENVIEW, IL 60025 US
 City-St-Zip:
 GLENVIEW, IL 60025 US

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

 Name:
 SHYLAMMA, ONNISSERIL
 Name:

 Address:
 4399 NW 85 TH WAY
 Address:

 City-St-Zip:
 CORAL SPRINGS, FL 33065 FL
 City-St-Zip:

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

 Name:
 CHERIAN, GEEVARGHESE
 Name:

 Address:
 6850 N LOREL
 Address:

 City-St-Zip:
 SKOKI, IL 60077
 City-St-Zip:

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: GEEVARGHESE CHERIAN DIR 04/29/2009