2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000100278

Entity Name: JBCPS INC

FILED Nov 13, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5685 ATLEE AVE JACKSONVILLE, FL 32205 LIS **Current Mailing Address: New Mailing Address:** 5685 ATLEE AVE JACKSONVILLE, FL 32205 US FEI Number: 20-3158209 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: SOMOGYI, GYULA 5685 ATLÉE AVE JACKSONVILLE, FL 32205 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: GYULA SOMOGYI Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition SOMOGYI, GYULA Name: Name: 5685 ATLEE AVE Address: Address: City-St-Zip: JACKSONVILLE, FL 32205 US City-St-Zip: Title: VΡ () Delete Title: () Change () Addition SOMOGYI, SHEILA M Name: Name: 5685 ATLEE AVE Address: Address: JACKSONVILLE, FL 32205 US City-St-Zip: 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: GYULA SOMOGYI PRES 11/13/2008