## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000022631

FILED Jan 28, 2008 Secretary of State

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Entity Name: JB PINA INC	
Current Principal Place of Business:	New Principal Place of Business:
1166 ALBION ST. NW PALM BAY, FL 32907 US	
Current Mailing Address:	New Mailing Address:
1166 ALBION ST. NW PALM BAY, FL 32907 US	
FEI Number: 20-4337792 FEI Number Applied For ( ) FEI Number	mber Not Applicable ( ) Certificate of Status Desired ( )
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
CORORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US	PINA, JOSHUA B 1166 ALBION ST. NW PALM BAY, FL 32907 US
The above named entity submits this statement for the purpose on the State of Florida.	of changing its registered office or registered agent, or both,
SIGNATURE: JOSHUA PINA	01/28/2008
Electronic Signature of Registered Agent	Date
Election Campaign Financing Trust Fund Contribution ( ).	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title:         D ( ) Delete           Name:         PINA, JOSHUA           Address:         7817 MAPLEWOOD DRIVE, APT. 607           City-St-Zip:         WEST MELBOURNE, FL 32904 US	Title: DPS (X) Change ( ) Addition Name: PINA, JOSHUA B Address: 1166 ALBION ST. NW City-St-Zip: PALM BAY, FL 32907 US
Title: ( ) Delete Name: Address: City-St-Zip:	Title: DT () Change (X) Addition Name: PINA, LIEKE Address: 1166 ALBION ST. NW City-St-Zip: PALM BAY, FL 32907 US
Title: ( ) Delete Name: Address: City-St-Zip:	Title: VP () Change (X) Addition Name: PINA, BARRY B Address: 855 REMSEN AVE. NW City-St-Zip: PALM BAY, FL 32907 US

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: JOSHUA PINA DPS 01/28/2008