2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

Mar 07, 2008 08:00 A Secretary of State DOCUMENT # P06000075306 1. Entity Name JJB PROPERTIES INC. Mailing Address Principal Place of Business 3886 MIMOSA PLACE 5401 CENTRAL AVE PALM HARBOR, FL 34685 SAINT PETERSBURG, FL 33710 CR2E034 (11/05) 01292008 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-4968667 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MCATEE, CAROL DO NOT WRITE 5401 CENTRAL AVENUE ST PETERSBURG, FL 33710 IN THIS SPACE 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 reinstation) 000000850**3**21 03/25/08-80016-020 150.00 \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE BUREK, JASON J NAME STREET ADDRESS 3628 KINGS RD #101 CITY-ST-ZIP PALM HARBOR, FL 34685 TITLE BUREK, REBECCA L NAME STREET ADDRESS 3628 KINGS RD #101 PALM HARBOR, FL 34685 CITY+ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

IATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED