

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000094157

Entity Name: JB PERFORMANCE USA, INC.

FILED
Jun 14, 2007
Secretary of State

Current Principal Place of Business:

6445 S. CHICKASAW TRAIL
SUITE 263
ORLANDO, FL 32829

New Principal Place of Business:

Current Mailing Address:

6445 S. CHICKASAW TRAIL
SUITE 263
ORLANDO, FL 32829

New Mailing Address:

FEI Number: 20-5211049

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIVERA, REINALDO
6445 S. CHICKASAW TRAIL
SUITE 263
ORLANDO, FL 32829 US

Name and Address of New Registered Agent:

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:

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:

Title: PRES () Delete
Name: BOU, JOSE J
Address: 6445 S. CHICKASAW TRAIL, SUITE 263
City-St-Zip: ORLANDO, FL 32829

Title: VP () Delete
Name: BOU-VAZQUEZ, LARISSA
Address: 6445 S. CHICKASAW TRAIL SUITE 263
City-St-Zip: ORLANDO, FL 32829

Title: MGRM () Delete
Name: RIVERA, REINALDO
Address: 6445 S. CHICKASAW TRAIL SUITE 263
City-St-Zip: ORLANDO, FL 32829

Title: SEC (X) Delete
Name: SOTO, MARIA A
Address: 6445 S. CHICKASAW TRAIL SUITE 263
City-St-Zip: ORLANDO, FL 32829

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TRS (X) Change () Addition
Name: RIVERA, REINALDO
Address: 6445 S. CHICKASAW TRAIL SUITE 263
City-St-Zip: ORLANDO, FL 32829

Title: () Change () Addition
Name:
Address:
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: JOSE BOU

P

06/14/2007

Electronic Signature of Signing Officer or Director

Date