2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2008
Secretary of State

DOCUMENT# P07000042720

Entity Name: J PAR SALES, INC.

Current Principal Place of Business:

522 NW TURTON TERRACE
PORT ST LUCIE, FL 34983

New Principal Place of Business:

1498 SW HUNNICUT AVE
PORT ST LUCIE, FL 34953 US

Current Mailing Address:

522 NW TURTON TERRACE
PORT ST LUCIE, FL 34983

New Mailing Address:

1498 SW HUNNICUT AVE
PORT ST LUCIE, FL 34953 US

FEI Number: 20-8762100 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PARSONS, JOHN D
522 NW TURTON TERRACE
PORT ST LUCIE, FL 34983 US

Name and Address of New Registered Agent:

PARSONS, JOHN D
1498 SW HUNNICUT AVE
PORT ST LUCIE, FL 34953 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: 01/12/2008
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete
Name: PARSONS, JOHN D
Address: 522 NW TURTON TERRACE
City-St-Zip: PORT ST LUCIE, FL 34983

Title: VP ( ) Delete
Name: PARSONS, ELIA R
Address: 522 NW TURTON TERRACE
City-St-Zip: PORT ST LUCIE, FL 34983

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition
Name: PARSONS, JOHN D
Address: 1498 SW HUNNICUT AVE
City-St-Zip: PORT ST LUCIE, FL 34953 US

Title: VP (X) Change ( ) Addition
Name: VIDAILLET-PARSONS, ELIA R
Address: 1498 SW HUNNICUT AVE
City-St-Zip: PORT ST LUCIE, FL 34953 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: JOHN D. PARSONS PSTD 01/12/2008
Electronic Signature of Signing Officer or Director — Date