2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000066319

Entity Name: J&B ALLIANCE, INC.

FILED Apr 20, 2009 Secretary of State

Current Principal Place of Business: New P	incipal Place of Business:
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4122 BOCA WOODS DRIVE 5201 BLUE LAGOON DRIVE ORLANDO, FL 32826

8TH FLOOR MIAMI, FL 33126

Current Mailing Address: New Mailing Address:

5201 BLUE LAGOON DRIVE 4122 BOCA WOODS DRIVE ORLANDO, FL 32826

8TH FLOOR MIAMI, FL 33126

FEI Number: 14-2002003 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:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition CFO () Delete Title:

CHRISTIAN, JOFFRE JOFFRE, CHRISTIAN Name: Name: 4122 BOCA WOODS DRIVE 5201 BLUE LAGOON DRIVE, 8TH FLOOR Address: Address:

City-St-Zip: ORLANDO, FL 32826 City-St-Zip: MIAMI, FL 33126

CFO Title: CFO Title: () Delete (X) Change () Addition

Name: JOFFRE, CHRISTIAN Name: JOFFRE, CHRISTIAN

4122 BOCA WOODS DRIVE 5201 BLUE LAGOON DRIVE, 8TH FLOOR Address: Address:

ORLANDO, FL 32826 MIAMI, FL 33126 City-St-Zip: City-St-Zip:

Title: Title: (X) Change () Addition () Delete SEC WILHELM, ZIEGLER J ESQ. JOFFRE, CHRISTIAN Name: Name:

171 17TH ST , NW, STE 2106 5201 BLUE LAGOON DRIVE, 8TH FLOOR Address: Address:

City-St-Zip: ATLANTA, GA 30363 City-St-Zip: MIAMI, FL 33126

Title: () Delete Title: **PRES** () Change (X) Addition

BLAES, ARNE Name: Name: Address: Address:

5201 BLUE LAGOON DRIVE, 8TH FLOOR

City-St-Zip: City-St-Zip: MIAMI, FL 33126

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: CHRISTIAN JOFFRE SEC 04/20/2009