2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2009
Secretary of State

DOCUMENT# P07000096764

Entity Name: JB 2 EXCEED INC.

Current Principal Place of Business:

1919 NW 19TH STREET, SUITE 623
FT. LAUDERDALE, FL 33311

New Principal Place of Business:

Current Mailing Address:

1919 NW 19TH STREET, SUITE 623
FT. LAUDERDALE, FL 33311

New Mailing Address:

FEI Number: 26-2192010 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MEYERS, MARK
13 CASTLE HARBOR ISLE
FT. LAUDERDALE, FL 33308 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: MEYERS, MARK
Address: 13 CASTLE HARBOR ISLE
City-St-Zip: FT. LAUDERDALE, FL 33308

Title: DST ( ) Delete
Name: PERSICHETTI, ALESSANDRA
Address: 13 CASTLE HARBOR ISLE
City-St-Zip: FT. LAUDERDALE, FL 33308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: SCHAPIRA, GIANNI
Address: 1919 NW 19 STREET, SUITE 623
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: DST (X) Change ( ) Addition
Name: SCHAPIRA, GIANNI
Address: 1919 NW 19 STREET SUITE, 623
City-St-Zip: FORT LAUDERDALE,, FL 33311

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: G. SCHAPIRA DP 01/16/2009

Electronic Signature of Signing Officer or Director Date