2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Aug 08, 2006 8:00 am DOCUMENT # P93000040794 Secretary of State 1. Entity Name 08-08-2006 90002 024 ***150.00 J'S TRADING POST, INC. Principal Place of Business Mailing Address 2000 NW 79 ST. MIAMI FL 33147 2770 N.W. 79TH STREET MIAMI FL 33147 2. Principal Place of Business Suite, Apt. #, etc. 2nd MOORE CR2E034 (4/06) 4. FEI Number City & State Applied For 65-0418520 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CURRAN, JOHN 2770 NW 79 ST. Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33147** Zip Code 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, $\underline{\underline{\underline{z}}}$ SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 \$5.00 May Be 9. Election Campaign Financing DUE BY September 6, 2006 late fee. By checking this box, the corporation certifies it did Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State not receive prior notice. Fee to file is \$150.00. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete Change Addition CURRAN, JOHN J NAME NAME 2770 N.W. 79TH STREET STREET ADDRESS STREET ADDRESS **MIAMI FL 33147** CITY-ST-719 CITY-ST-ZIP mu ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY ST ZIP CITY-ST-ZIP me ☐ Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete me TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 anyaddress, with all the empowered.

SIGNATURE:

SIGNATURE:

SIGNATURE:

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

Obytime Phone #

FILED

ATTACHMENT August 1 2006

To Whom it May Concern; J's TRADING POST. Inc. P93000040794

Regnanos to Document#

Due to failing health, I was required by my Doctor to retwice And not Activity run my co-panys- which made the Mailing Address-incorrect - The New AND permanate correct Mailing Address is

15140 South River Drive MIAMIN FloriDA 33169-6122

Thanking you I Am.