

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000056642

Entity Name: BAR-J.P. INC.

FILED
May 09, 2006
Secretary of State

Current Principal Place of Business:

4700 NW BOCA RATON BLVD STE 104
BOCA RATON, FL 334314860 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 160278
BIG SKY, MT 59716 US

New Mailing Address:

FEI Number: 65-0681998

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SCHWARTZ, ROBERT M
4700 NW BOCA RATON BLVD, SUITE 104
BOCA RATON, FL 334314860 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: P () Delete
Name: PARISER, PAUL S
Address: PO BOX 7538
City-St-Zip: DELRAY BEACH, FL 33482

Title: VPST () Delete
Name: REID, LUCIE S
Address: PO BOX 7538
City-St-Zip: DELRAY BEACH, FL 33482

Title: VCON () Delete
Name: PARISER, BENJAMIN S
Address: 1600 DEXTER AVE N STE B2
City-St-Zip: SEATTLE, WA 98109 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PARISER, PAUL S
Address: PO BOX 160278
City-St-Zip: BIG SKY, MT 59716

Title: VPST (X) Change () Addition
Name: REID, LUCIE S
Address: PO BOX 160278
City-St-Zip: BIG SKY, MT 59716

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

I hereby certify that the information supplied with this filing does not qualify for the 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: BENJAMIN S. PARISER

VCON

05/09/2006

Electronic Signature of Signing Officer or Director

Date