

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P96000056642

Entity Name: BAR-J.P. INC.

FILED  
Sep 30, 2009  
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:

222 SOUTH BROADWAY #2  
BELGRADE, MT 59714 US

## New Mailing Address:

P.O. BOX 849  
OCEAN SHORES, WA 98569 US

FEI Number: 65-0681998

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

PARISER, PAUL S  
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: PAUL S. PARISER

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 160278  
City-St-Zip: BIG SKY, MT 59716

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

Title: VCON (X) 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: P.O. BOX 849  
City-St-Zip: OCEAN SHORES, WA 98569

Title: VP (X) Change ( ) Addition  
Name: PARISER, BENJAMIN S  
Address: P.O. BOX 849  
City-St-Zip: OCEAN SHORES, WA 98569

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

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: BENJAMIN S. PARISER

VP

09/30/2009

Electronic Signature of Signing Officer or Director

Date