2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2005
Secretary of State

DOCUMENT# P97000028069

Entity Name: B & J DISTRIBUTORS, INC.

Current Principal Place of Business:

165 NORMAN DRIVE
TALLAHASSEE, FL 32304 US

New Principal Place of Business:

Current Mailing Address:

165 NORMAN DRIVE
TALLAHASSEE, FL 32304 US

New Mailing Address:

FEI Number: 59-3435738 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SWEET, ROBERT C
64 SUMMERWIND CIR N
CRAWFORDVILLE, FL 32327 US

Name and Address of New Registered Agent:

JAIN, PUSHPA
165 NORMAN DR
TALLAHASSEE, FL 32304 US

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: PUSHPA JAIN HS 02/20/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P (X) Delete
Name: SMITH, HARRY
Address: 165 NORMAN DRIVE
City-St-Zip: TALLAHASSEE, FL 32304

Title: S ( ) Delete
Name: JAIN, BABU L
Address: 907 GAMBLE STREET
City-St-Zip: TALLAHASSEE, FL 32310

Title: T ( ) Delete
Name: JAIN, PUSHPA
Address: 907 GAMBLE STREET
City-St-Zip: TALLAHASSEE, FL 32310

Title: V (X) Delete
Name: VAN SANT, HOWARD
Address: 165 NORMAN DRIVE
City-St-Zip: TALLAHASSEE, FL 32304

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 Section 119.07(3)(i), 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: PUSHPA JAIN HS S 02/20/2005
Electronic Signature of Signing Officer or Director Date