

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S77496

Entity Name: JDP PRODUCTS, INC.

FILED  
Apr 29, 2004  
Secretary of State

## Current Principal Place of Business:

C/O COBBLESTONES RESTAURANT  
11924 FOREST HILL BLVD, #28  
WELLINGTON, FL 33414

## New Principal Place of Business:

## Current Mailing Address:

C/O COBBLESTONES RESTAURANT  
11924 FOREST HILL BLVD, #28  
WELLINGTON, FL 33414

## New Mailing Address:

FEI Number: 65-0293420

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

PROSEN, JAMES  
2120 CANTER WAY  
WELLINGTON, FL 33414 US

## Name and Address of New Registered Agent:

PROSEN, JAMES  
4470 ISLAND REEF DRIVE  
WELLINGTON, FL 33467 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: JAMES PROSEN

04/29/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PS ( ) Delete  
Name: PROSEN, JAMES,  
Address: 2120 CANTER WAY  
City-St-Zip: WELLINGTON, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change ( ) Addition  
Name: PROSEN, JAMES,  
Address: 4470 ISLAND REEF DRIVE  
City-St-Zip: WELLINGTON, FL 33467

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: JAMES PROSEN

P

04/29/2004

Electronic Signature of Signing Officer or Director

Date