

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000048897

**Entity Name:** JB'S ACCESSORIES, INC.

**Current Principal Place of Business:**

1315 NORTH AVENUE  
LEHIGH ACRES, FL 33972

**Current Mailing Address:**

1315 NORTH AVENUE  
LEHIGH ACRES, FL 33972 US

**FEI Number:** 20-4633531

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BUONPASTORE, JOHN  
1315 NORTH AVENUE  
LEHIGH ACRES, FL 33972 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name BUONPASTORE, JOHN  
Address 1315 NORTH AVENUE  
City-State-Zip: LEHIGH ACRES FL 33972

Title VP  
Name BUONPASTORE, JOSEPH  
Address 15751 PRAIRIE CREEK BLVD.  
City-State-Zip: PUNTA GORDA FL 33982

*I hereby 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 all other like empowered.*

**SIGNATURE:** JOHN BUONPASTORE

**PRESIDENT**

**02/23/2015**

Electronic Signature of Signing Officer/Director Detail

Date