

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2004 08:00 AM
Secretary of State

DOCUMENT # M83903 1. Entity Name EL JIREH, INC.	
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Principal Place of Business C/O ANTHONY J. ORTNER 2802 S. TANNER RD. ORLANDO, FL 32820	Mailing Address C/O ANTHONY J. ORTNER 2802 S. TANNER RD. ORLANDO, FL 32820
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DO NOT WRITE IN THIS SPACE



01302004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2901153	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent LIGUORI, MICHAEL 2802 S. TANNER RD. ORLANDO, FL 32820	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Michael Liguori PRES (MICHAEL LIGUORI) DATE: 2-16-04

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	U000000064331 02/24/04-80008-005 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LIGUORI, MICHAEL 2802 S. TANNER RD ORLANDO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LIGUORI, MARIA 2802 S. TANNER RD ORLANDO, FL
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: Michael Liguori PRES (MICHAEL LIGUORI) DATE: 2-16-04 DAYTIME PHONE: 407-628-5333

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR