2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000066841

City-St-Zip:

NORTH FORT MYERS, FL 33903

FILED Jan 10, 2007 Secretary of State

Entity Name: SJZ CONSTRUCTION ENTERPRISES, INC.					
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1637 SWAN TERRACE NORTH FT. MYERS, FL 33903			5473 LEE STREET UNIT #201 LEHIGH ACRES, FL		
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
1637 SWAN TERRACE NORTH FT. MYERS, FL 33903		5473 LEE STREET UNIT #201 LEHIGH ACRES, FL			
FEI Number:	20-2657785	FEI Number Applied For ()	El Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
JOHNSON, CHRIS N 5473 LEE STREET UNIT #201 LEHIGH ACRES, FL 33971 US				JOHNSON, CHRIS N 1637 SWAN TERRACE NORTH FORT MYERS, FL 33903 US	
The above in the State	named entit of Florida.	y submits this statement for the purp	ose of changing its registere	d office or registered agent, or both,	
SIGNATURE: CHRIS JOHNSON				01/10/2007	
Electronic Signature of Registered Agent				Date	
Election Cam	npaign Financ	ing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	JOHNSON, 0 1637 SWAN		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D ZELLMAN, J 3314 27TH S LEHIGH, FL	TREET W	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	D SNYDER, LI: 1637 SWAN		Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

SIGNATURE: CHRIS JOHNSON D 01/10/2007