

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2004 8:00 am
Secretary of State

02-04-2004 90080 031 ***150.00

DOCUMENT # P95000092341					
1. Entity Name CEJAY ENGINEERING, INC.					
Principal Place of Business 676 THRUSS CT MARCO ISLAND, FL 34145 US			Mailing Address 676 THRUSS CT MARCO ISLAND, FL 34145 US		
2. Principal Place of Business 25080 GOLDCREST DR Suite, Apt. #, etc.		3. Mailing Address P.O. Box 367989 Suite, Apt. #, etc.			
City & State Bonita Springs, FL		City & State Bonita Springs FL		4. FEI Number 65-0628429	
Zip 34134		Country USA		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HAYNES, DEREK 676 THRUSS CT MARCO ISLAND, FL 34145			7. Name and Address of New Registered Agent Name: HAYNES, DEREK Street Address (P.O. Box Number is Not Acceptable): 25080 GOLDCREST DR City: Bonita Springs FL Zip Code: 34134		
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: President 30 JAN. 04 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when relistening)					
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			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PDST HAYNES, DEREK 676 THRUSS CT MARCO ISLAND, FL 34145	☐ Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PDST HAYNES, DEREK P.O. BOX 367989 BONITA SPRINGS, FL 34136	☒ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PDST HAYNES, DEREK P.O. BOX 367989 BONITA SPRINGS, FL 34136	☐ Change ☐ Addition			
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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: President 30 JAN 04 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
DEREK HAYNES, PRES.					