

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

04 FEB -9 AM 10:23

DOCUMENT # 431700

1. Entity Name
DENNIS JENKINS ASSOCIATES, INC.



Principal Place of Business
5813 SW 68TH ST
S MIAMI, FL 33143

Mailing Address
5813 SW 68TH ST
S MIAMI, FL 33143



DO NOT WRITE IN THIS SPACE

RENEWAL STATEMENT
01/21/2004 No Change CR2E034 (10/03) 0

4. FEI Number
59-1469071

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HAND, ELIZABETH J
16VV8 DURHAM AVE
2699 S. BAYSHORE DR.
FORT MYERS, FL 33908

DO NOT WRITE
IN THIS SPACE

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
JENKINS, DENNIS
5813 SW 68TH ST
S MIAMI, FL 33143

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U000000012248
01/26/04-80001-025 150.00

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)(f), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dennis Jenkins Pres 1/21/04 665-696

Date

Daytime Phone #