## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F00000005953

Entity Name: S&J ENTERPRISES OF FT. LAUDERDALE, INC.

FILED Apr 30, 2009 Secretary of State

11497 COLUMBIA PK DR W, STE # 7 449 HAWKEYE VIEW LANE JACKSONVILLE, FL 32258 SUITE 8, CORP BOX 10

ST. AUGUSTINE, FL 32095

Current Mailing Address: New Mailing Address:

11497 COLUMBIA PK DR W, STE # 7
JACKSONVILLE, FL 32258

449 HAWKEYE VIEW LANE
SUITE 8, CORP BOX 10
ST. AUGUSTINE, FL 32095

FEI Number: 59-3651612 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

PAPAGEORGE, JOHN 11497 COLUMBIA PK DR W, STE # 7 JACKSONVILLE, FL 32258 US PAPAGEORGE, JOHN 449 HAWKEYE VIEW LANE SUITE 8, CORP BOX 10 ST. AUGUSTINE, FL 32095 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: 04/30/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PC ( ) Delete Title: PC (X) Change ( ) Addition Name: PAPAGEORGE, SPYROS Name: PAPAGEORGE, SPYROS

 Address:
 11497 COLUMBIA PK DR W, STE # 7
 Address:
 449 HAWKEYE VIEW LANE

 City-St-Zip:
 JACKSONVILLE, FL 32258
 City-St-Zip:
 ST. AUGUSTINE, FL 32095

Title: VD ( ) Delete Title: VD (X) Change ( ) Addition Name: PAPAGEORGE, JOHN Name: PAPAGEORGE, JOHN

Address: 11497 COLUMBIA PK DR W, STE # 7 Address: 449 HAWKEYE VIEW LANE
City-St-Zip: JACKSONVILLE, FL 32258 City-St-Zip: ST. AUGUSTINE, FL 32095

Title: SD () Delete Title: SD (X) Change () Addition

 Name:
 PAPAGEORGE, MELANIE
 Name:
 PAPAGEORGE, MELANIE

 Address:
 11497 COLUMBIA PK DR W, STE # 7
 Address:
 449 HAWKEYE VIEW LANE

 City-St-Zip:
 JACKSONVILLE, FL 32258
 City-St-Zip:
 ST. AUGUSTINE, FL 32095

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

SIGNATURE: MELANIE PAPAGEORGE SD 04/30/2009