

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2008 08:00 A
Secretary of State

DOCUMENT # F98000001696 1. Entity Name ARJAY ENTERPRISES OF NEVADA INC.	
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Principal Place of Business 1717 N. BAYSHORE DR #2331 MIAMI, FL 33132-1160	Mailing Address 1717 N. BAYSHORE DR #2331 MIAMI, FL 33132-1160
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03052008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 91-1884527	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent CANTWELL, RONALD J 1717 N. BAYSHORE DR #2331 MIAMI, FL 33132-1160

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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 _____ (NOTE: Registered Agent signature required when reappointing) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	U000000853096 03/26/08-80055-023 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CPS CANTWELL, RONALD J 1717 N. BAYSHORE DR #2331 MIAMI, FL 331321160
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCVT CANTWELL, PATRICIA M 1717 N. BAYSHORE DR #2331 MIAMI, FL 331321160
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Ronald J Cantwell President* 3/6/08 (305)3779613
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #