

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 02, 2004 8:00 am
Secretary of State

04-02-2004 90028 039 ***150.00

DOCUMENT # G52130

1. Entity Name

GLJ ENTERPRISES, INC.



Principal Place of Business

2475 W. INT'L SPDWY BLVD. #200
DAYTONA BEACH FL 32114

Mailing Address

2475 W. INT'L SPDWY BLVD. #200
DAYTONA BEACH FL 32114

2. Principal Place of Business

2455 W. INT'L SPDWY BLVD

Suite, Apt. #, etc.

402

3. Mailing Address

2455 W. INT'L SPDWY BLVD

Suite, Apt. #, etc.

402

City & State

DAYTONA BEACH FL

City & State

DAYTONA BEACH FL

Zip

32114

Country

USA

Zip

32114

Country

USA



MOORE

CR2E034 (11/03)

4. FEI Number

59-2307114

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NOTARAS, LITSA
100 SILVER BEACH AVE #816
DAYTONA BEACH FL 32118

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME NOTARAS, JOHN
STREET ADDRESS 5929 PHYLLIS LOU CIR.
CITY-ST-ZIP PORT ORANGE FL

TITLE S ☐ Delete
NAME NOTARAS, LITSA
STREET ADDRESS 100 SILVERBEACH AVE. #816
CITY-ST-ZIP DAYTONA BCH. FL

TITLE T ☐ Delete
NAME NOTARAS, GEORGE
STREET ADDRESS 100 SILVERBEACH AVE. #816
CITY-ST-ZIP DAYTONA BCH. FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

JOHN NOTARAS

Date

3-30-04

Daytime Phone #

386-239-0606