## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90047 007 \*\*\*150.00

## DOCUMENT # G68205

1. Corporation Name

H. J. L. ENTERPRISES, INC.

	<del>-</del>		NEW	ADDR	ESS"			
Principal Place	e of Business	Mailing Address			, <b>L</b>			
1021 NE 44TH CRT. X. CHAPILES ABOUD			CHARL	CHARLES TOOL		D		
775 NW 87TH AVENUE 775 NW 8XTH AVENUE 7			/ at V	8 FAI	PFAX	DR. BONOT WEITE IN	TUIC CDACE	
OAKLAND PARK FL 33071 CORAL SPRINGS FL 33071			30/1BLD	"B.A	AT. 105	DO NOT WRITE IN  3. Date Incorporated or Qualifed	THIS SPACE	
03			TAMA	aac i	FIA.	11/08/1983		Ì
- D-11ID	for all Provinces	2a, Mailing Address				4. FEI Number	I A	plied For
				33321		59-2341852	<u> </u>	t Applicable
21	# 44	Suite, Apt. #, etc.				39 234 1032	\$8.75	
			د <u>.</u>			5. Certificate of Status Desired	Fee Re	
22     27						6. Election Campaign Financing		May Be
<b>5</b> - <b>7</b>						Trust Fund Contribution	Added	, ,
23     28			Country					
24	. ' _ ' '			<b>'</b>		8. This corporation owes the current year Intangible Personal Property Tax. Yes No		
44]	9. Name and Address of Current	<u> </u>	30	j		10. Name and Address of New Regist		
	6. come and company at animit		A	81 Nan	ne		_	
ABOUD, CHARLES						(D.O. Day Number in Mat A constability		
775-NW 87TH AVENUE NEW ADDRESS OCHAL SPRINGS FL 33071				82 Street Address (P.O. Box Number is Not Acceptable)				
dort dort	ALISPRINGS FLIGSO71 175 1	,, Gp. C = U		83				1
				84 City		·	FL  85   Zip	Code
44 Dureuset	to the provisions of Sections 607 0502	and 607 1508 Florida S	tatutes the a	hove-nam	ed cornor	ration submits this statement for the purpo	se of changing its	registered
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered								
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (	NOTE: Registered	1 Anent sinnati	ure required y	when reinstating) DA	TE	\
12.	OFFICERS AND		13.	, gom orginal		ADDITIONS/CHANGES TO OFFICER	S AND DIRECTO	RS IN 12
TITLE	DP	☐ DELET		TLE			☐ Change	☐ Addition
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NAME				TREET ADORE	ss	•		
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NAME	•				ee			Ì
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CITY-ST-ZIP			6.4 C	ITY-ST-ZIP				

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR