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**

DOCUMENT # L96349 1. Corporation Name

D.J.C. ENTERPRISES, INC.

FILED Jan 27, 1999 8:00am **Secretary of State**

01-27-1999 90026 022 ***150.00



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Principal Place of Business Mailing Address								
4275 B OKEECHOBEE BLVD 4275 B OKEECHOBEE BLVI								
WEST PALM BEACH FL 33409 WEST PALM BEACH FL 334								
US						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed 08/24/1990.		. , , ,
والموافعة المنظول المستخدمة المستخدم المستخدمة المستخدم المستخدم المستخدم المستخدم المستخدم المستخدم المستخدم المستخ						4. FEI Number		Applied For
2. Principal Place of Business 2a. Mailing Address							}	··-
21 26						65-0295846		Not Applicable
Suite, Apt. #, etc. Suite, Ap. 27			Apt. #, etc.			5. Certifcate of Status Desired \$8.75 Additional Fee Required		
City & State City & State						6. Election Campaign Financing	\$5.0	0 мау Ве
23		28				Trust Fund Contribution	•	ed to Fees
Zip				Country		8. This corporation owes the current year Intang	aible	
— ·		⊢ ¬ `	30	¬ ·		_ T	∃Yes	□No
24	25	29	30	<u>u</u>		10. Name and Address of New Registered Agent		
	9. Name and Address of Currer	nt Registered Agent		81	Name	10. Halle and Address of New (togisteres Ag	-	
ent	PKO, JAMES	•		۱,۰	Name			
1100 SOUTH FEDERAL HIGHWAY				82	Street Address (P.O. Box Number is Not Acceptable)			
∣ ∙ stu	JART FL 34994	٠.	1	83		TELEVISION PROPERTY AND	1.1	21, 141, 121, 121
]						· 通知於自由於自己持有的結構的影響的		
		A second second	[84	City	5 1	85 Zi	ip Code
-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								
-11- Pursuant	to the provisions of Sections 607.050	of Florida, Such change was	tes, the ab authorized	bv th	nameo cor he corporat	tion's board of directors. I hereby accept the appointment	nent as	registered
agent. La	am familiar with, and accept the obliga	itions of, Section 607.0505, Fl	orida Statul	tes.				
SIGNATURE	and the second s							
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NOT	E: Registered A	Agent s	signature requir	red when reinstating) DATE		
12.	OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	PST	☐ DELETE	1.1 TITL	LΕ		in the state of th	Chang	ge
NAME .	CIRRITO, DONALD, E		1.2 NAM	WE				•
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	JENSEN BEACH FL		1.4 CIT					,
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TITLE	·	C DELETE						,
NAME	, , ,		2.2 NAM	WE	ļ			
STREET ADDRESS	3		2.3 STR	REETA	ADDRESS			
CITY-ST-ZIP		A	2.4 CIT	TY-ST-	-ZIP			
TITLE	and the second s	☐ DELETE	3.1 TFTL	LÉ			Chang	ge 🔛 Addition
NAME:		•	3.2 NAM	ME				
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STREET ADDRESS	Hell Sense		3.4. CIT					清極網驗
CITY-ST-ZIP		. DELETE	4.1 TITL		- ZIF	पुरुष हुने हुने हैं जी का होती हैं के हिल् <mark>य</mark>	Chanc	ae Addition
TITLE	_	· . '. , □ DELETE					0/.0/.5	,
NAME 2 OF U.S.		with the second of the	4. 2 NA					
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TITLE		☐ DELETÉ	5.1 TITL	LE			Chang	ge
NAME		6.5	5.2 NAM	ME		The state of the s		
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		☐ DELETE	6.1 TITL				Chang	ge Addition
TITLE .	PROFESSION COLLEGE		6.2 NAM					,- <u> </u>
NAME	Section Hanne							
STREET ADDRESS	Bandara Artista e e		6.3 STF	REETA	ADORESS			
	1					v ·		

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 suppliemental 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 conforation or the receiver of 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 ap attachment with an address, with all other like empowered.