2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

changed, or on ar

attachment with an address, with all other like empowered.

Feb 04, 2004 08:00 AM DOCUMENT # M89283 **Secretary of State** 1. Entity Name W.J. INVESTMENTS, LIMITED, INCORPORATED Mailing Address Principal Place of Business 3000 ISLAND BLVD. 3000 ISLAND BLVD. BOX 1905 BOX 1905 NORTH MIAMI BEACH FL 33160 NORTH MIAMI BEACH FL 33160 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (11/03) 4. FEI Number Applied For City & State City & State 65-0076157 Not Applicable Zip Ζiρ Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent SADILEK, VLADIMIR Street Address (P.O. Box Number is Not Acceptable) 3000 ISLAND BLVD #1905 N. MIAMI BEACH FL 33160 Zip Code City 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 DATE (NOTE Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. U00000034669 Change Addition 02/05/04-80092-012 150.00 ☐ Defete TITLE mf HAME SADILEK, VLADIMIR NAME STREET ADDRESS 3000 ISLAND BLVD #1905 STREET ADDRESS AVENTURA FL 33160 CHY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete ☐ Chance TABLE SADILEK, VLADIMIR, JR. NAME NAME 3000 ISLAND BLVD #1905 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP AVENTURA FL 33160 CITY-ST-7IP ☐ Change M Addition TD ☐ Delete TITLE SADILEK, JANA MARKE STREET ADDRESS 3000 ISLAND BLVD #1905 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP AVENTURA FL 33160 Change Addition ☐ Datete TOTAL NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change Addition Delete TIDE TELL NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP C/TY - ST - 71P ☐ Change Addition Delete 33717 TITLE MANAF MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filling 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

VLADIMR SADIUGK PRESIDENT 1-31-04 305 0338619

FILED