

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 07, 2011
Secretary of State

Entity Name: 4CJ, INC.

Current Principal Place of Business:

4401 S.W. 52ND CIRCLE
APT 105
OCALA, FL 34474

New Principal Place of Business:

Current Mailing Address:

4401 S.W. 52ND CIRCLE
APT 105
OCALA, FL 34474

New Mailing Address:

FEI Number: 27-0777433

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAMIREZ, JAIME PASTOR
4401 S.W. 52ND CIRCLE
APT 105
OCALA, FL 34474 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P
Name: RAMIREZ, JAIME PASTOR
Address: 4401 S.W. 52ND CIRCLE, APT 105
City-St-Zip: Ocala, FL 34474

Title: VP
Name: DUARTE, INGIRD J PASTORA
Address: 4401 SW 52 CIRCLE UNIT 105
City-St-Zip: Ocala, FL 34474

Title: T
Name: ATENSIO, ARIS
Address: 6811SW 60TH AVE
City-St-Zip: Ocala, FL 34476

Title: A.B
Name: MARTINEZ, NAZARETH
Address: 13 PECAN RUN RADIAL
City-St-Zip: Ocala, FL 34472

Title: S
Name: AMPUDIA, MARIA G
Address: PO BOX 773248
City-St-Zip: Ocala, FL 34477

Title: AB
Name: MARTINEZ, EFRAIN
Address: 13 PECAN RUN RADIAL
City-St-Zip: Ocala, FL 34472

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JAIME RAMIREZ

PR

04/07/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date