

2004 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90214 043 ***150.00

DOCUMENT # P00000105620

1. Entity Name
JOHN J ENTERPRISE, INC.



Principal Place of Business
**8325 N.E. 2ND AVENUE
MIAMI, FL 33138**

Mailing Address
**8325 N.E. 2ND AVENUE
MIAMI, FL 33138**

DO NOT WRITE IN THIS SPACE

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04262004 No Chg-P CR2E034 (10/03)

4. FEI Number
75-2978736

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**DEROSE, PHILIPPE
8325 N.E. 2ND AVENUE
MIAMI, FL 33138**

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IN THIS SPACE**

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 renewing)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
DEROSE, PHILIPPE
8325 N.E. 2ND AVENUE
MIAMI, FL 33138**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
DUVERNE, JONAS
10011 PERIWINKLE STREET
MIRAMAR, FL 33025**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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:

Philippe Deroose
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/04 305 5823246
Date Daytime Phone #