

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000016674

1. Entity Name  
WNJ ENTERPRISES, INC.

Principal Place of Business Mailing Address  
2174 DEER CREEK WAY 2174 DEER CREEK WAY  
DEERFIELD BEACH FL 33442 DEERFIELD BEACH FL 33442

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number 65108 4866 Applied For Not Applicable

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

## 6. Name and Address of Current Registered Agent

## 7. Name and Address of New Registered Agent

SHENDELL, TAMAR DUFFNER ESQ  
3650 N FEDERAL HIGHWAY SUITE 202  
LIGHTHOUSE POINT FL 33064

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City FL Zip Code

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.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

## 11. OFFICERS AND DIRECTORS

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete  
NAME JOHNSON, WAYNE  
STREET ADDRESS 2174 DEER CREEK WAY  
CITY-ST-ZIP DEERFIELD BEACH FL 33442

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME LABOUNTY, NANCY  
STREET ADDRESS 2174 DEER CREEK WAY  
CITY-ST-ZIP DEERFIELD BEACH FL 33442

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: WAYNE JOHNSON  
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED  
Jan 14, 2002 8:00 am  
Secretary of State

01-14-2002 90002 003 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

UBR2002 AV

CR2E034 (9/01)

1-6-02 954-360-7715  
Date Daytime Phone #