

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 24, 2006 8:00 am
Secretary of State

01-24-2006 90017 034 ***158.75

DOCUMENT # P01000071043

1. Entity Name

ZBJ ENTERPRISES, INC.



Principal Place of Business

C/O BJ'S CARPET & FLOORING
125 N W 23RD AVE STE #1
GAINESVILLE FL 32609

Mailing Address

C/O BJ'S CARPET & FLOORING
125 N W 23RD AVE STE #1
GAINESVILLE FL 32609



2. Principal Place of Business

ZBJ Enterprises Inc.
Suite, Apt. #, etc.
Suite #1

3. Mailing Address

125 NW 23rd Avenue
Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/05)

City & State

Gainesville Florida
Zip 32609 Country Alachua

City & State

Zip Country

4. FEI Number

59-3732088

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MATREX CORPORATION
413 SW 4TH AVENUE
GAINESVILLE FL 32601-6551

7. Name and Address of New Registered Agent

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. 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 reinstating)

1/17/06

DATE

FILE NOW!!! FEE IS \$150.00.
After May 1, 2006 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE PCEO
NAME JACKSON, ZIOMARA
STREET ADDRESS 2138 NE 8TH ST.
CITY-ST-ZIP GAINESVILLE FL 32609 ☐ Delete

TITLE T
NAME JACKSON, BOSIE D
STREET ADDRESS 125 N W 23RD AVE STE #1
CITY-ST-ZIP GAINESVILLE FL 32609 ☒ Delete

TITLE S
NAME HERNANDEZ, FEDERICO J
STREET ADDRESS 125 N W 23RD AVE STE #1
CITY-ST-ZIP GAINESVILLE FL 32609 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: Ziomara L. Jackson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/06

352-316

Date

Daytime Phone #