

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000087985

Entity Name: KTJ ENTERPRISES, INC.

FILED
May 11, 2004
Secretary of State

Current Principal Place of Business:

1796 WAKE FOREST ROAD NW
PALM BAY, FL 32907

New Principal Place of Business:

Current Mailing Address:

1573 SUN GAZER DR
ROCKLEDGE, FL 32955

New Mailing Address:

1796 WAKE FOREST RD NW
PALM BAY, FL 32907

FEI Number: 59-3744621

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, JOEL T
1573 SUN GAZER DRIVE
ROCKLEDGE, FL 32955 US

Name and Address of New Registered Agent:

JONES, JOEL T
1796 WAKE FOREST RD NW
PALM BAY, FL 32907 US

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: JOEL T. JONES

05/11/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JONES, JOEL T
Address: 1573 SUN GAZER DR
City-St-Zip: ROCKLEDGE, FL 32955

Title: D () Delete
Name: JONES, KAREN V
Address: 1573 SUN GRAZER DR
City-St-Zip: ROCKLEDGE, FL 32955

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: JONES, JOEL T
Address: 1796 WAKE FOREST RD NW
City-St-Zip: PALM BAY, FL 32907

Title: D (X) Change () Addition
Name: JONES, KAREN V
Address: 1796 WAKE FOREST RD NW
City-St-Zip: PALM BAY, FL 32907

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOEL T. JONES

D

05/11/2004

Electronic Signature of Signing Officer or Director

Date