

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008 08:00 AM
Secretary of State

DOCUMENT # P01000118171

1. Entity Name
TJ'S MODULAR ENGINEERING, INC.



Principal Place of Business
11802 DUNNS BRANCH DRIVE WEST
JACKSONVILLE, FL 32218

Mailing Address
11802 DUNNS BRANCH DRIVE WEST
JACKSONVILLE, FL 32218



04102008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3761075

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

WINKLER, JOHN S
2515 OAK STREET
JACKSONVILLE, FL

**DO NOT WRITE
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 reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

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

U000000896848
04/25/08-80023-019 150.00

10. OFFICERS AND DIRECTORS

TITLE	DPT
NAME	SMITH, JOHNATHAN P
STREET ADDRESS	11802 DUNNS BRANCH DRIVE WEST
CITY-ST-ZIP	JACKSONVILLE, FL 32218
TITLE	VS
NAME	SMITH, JOHNATHAN P
STREET ADDRESS	11802 DUNNS BRANCH DRIVE WEST
CITY-ST-ZIP	JACKSONVILLE, FL 32218
TITLE	V
NAME	SMITH, JOHNATHAN P
STREET ADDRESS	11802 DUNNS BRANCH DRIVE WEST
CITY-ST-ZIP	JACKSONVILLE, FL 32218
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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:

Johnathan P Smith Johnathan P Smith

4-10-08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #