

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 02, 2007 08:00 AM
Secretary of State

DOCUMENT # P02000024376

1. Entity Name
YJA ENTERPRISES, INC.



Principal Place of Business
9021 SW 103 AVE.
MIAMI, FL 33176

Mailing Address
9021 SW 103 AVE.
MIAMI, FL 33176



02212007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
03-0398301

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

ALVARE, YIZENIA
9021 SW 103 AVE.
MIAMI, FL 33176

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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE PD
NAME ALVARE, YIZENIA
STREET ADDRESS 9021 SW 103 AVE.
CITY-ST-ZIP MIAMI, FL 33176

TITLE VD
NAME ALVARE, JESUS JR
STREET ADDRESS 8262 SW 44 ST
CITY-ST-ZIP MIAMI, FL 33155

TITLE SD
NAME ALVARE, JESUS SR
STREET ADDRESS 9021 SW 103 AVE.
CITY-ST-ZIP MIAMI, FL 33176

TITLE
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CITY-ST-ZIP

U000000653185
03/13/07-80010-014 150.00

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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: Yizenia Alvare
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #