## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

DOCUMENT #

P02000044995

## Jun 16, 2003 8:00 am **Secretary of State**

04-28-2003 90309 005 \*\*\*150.00

SJP ÉNTERPRISES, INC. 55048691 Principal Place of Business Mailing Address 6404 SUNTREE CT. 7749 LAKE WORTH RD. **GREENACRES FL 33413** LAKE WORTH FL 33467 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Sulte, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For City & State City & State 4. FEI Number Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DERODRA, SHAKUN Street Address (P.O. Box Number is Not Acceptable) 6404 SUNTREE CT. **GREENACRES FL 33413** 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) FILE NOW!!! . FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE TITLE ☐ Addition CR2E034 (10/02) Oelete SHAKUN DERODRA NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Oelete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Celete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Change TITLE ☐ Addition Delete STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 typort 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 trusted encowered 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 add 153 with all other like empowered.

SIGNATURE:

ITED NAME OF SIGNING OFFICER OR DIRECTOR

ttachment

SJP Enterprises Inc. 6404 Suntree Ct. Greenacres, FL 33413

June 13, 2003

**Division of Corporations** 

PO Box 1500

Tallahassee, FL 32302-1500

To Whom It May Concern:

This is the first year that we have sent in a Uniform Business Report for our corporation, SJP Enterprises Inc. Doc. No P02000044995. We sent everything in on time, but we forgot to include the federal ID #. The report was sent back to us with a letter dated May 6th. We were out of town when this letter was received and did not read the contents until last week.

We are sending in the corrected form now. Can you please disregard the penalty for this first time mistake?

Thank you for your consideration in this matter.

Sincerely,

Jayant Derodra

Vice President