


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 22, 2004 8:00 am
Secretary of State


09-22-2004 90002 046 ***150.00

DOCUMENT # P02000069001	
1. Entity Name DIAMOND J. ENTERPRISES, INC.	

Principal Place of Business 12571 66TH STREET NORTH LARGO, FL 33733	Mailing Address 12571 66TH STREET NORTH LARGO, FL 33733
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2. Principal Place of Business	<input checked="" type="checkbox"/> Mailing Address 4462 46th Ave N
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State ST. PETERSBURG, FL
Zip	Zip 33714

24086005



09022004 Chg-P CR2E034 (10/03)

4. FEI Number 82-0556033	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent
MCKEAN, JAMES M 4462 46TH AVENUE NORTH ST. PETERSBURG, FL 33714

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	DATE

FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT MCKEAN, JAMES H 4462 46TH AVENUE NORTH ST. PETERSBURG, FL 33714 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVPS MCKEAN, JAMES H 4462 46TH AVENUE NORTH ST. PETERSBURG, FL 33714 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

*Please Make
NOTE OF
NEW MAILING
ADDRESS*

12. I hereby certify that the information supplied with this filing 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 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: <i>James H. McKean</i>	JAMES H. MCKEAN 9-20-04 727-409-7174
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date Daytime Phone #

#PO2000069001

24086005

To Whom It May Concern

Diamond J. Enterprises, Inc.

did not receive prior notice except
for the postcard. Enclosed is
my check for \$150.00

Thanks

Diamond J. Enterprises, Inc.

JAMES H. McKEAN