

ANNUAL REPORT

DOCUMENT # P02000086949

1. Entity Name
GJ & JW ENTERPRISE, INC.



Principal Place of Business
11701 NW 102ND RD.
SUITE #14
MEDLEY, FL 33178

Mailing Address
11701 NW 102ND RD.
SUITE #14
MEDLEY, FL 33178

DO NOT WRITE IN THIS SPACE

FILED
Mar 19, 2004 8:00 am
Secretary of State

03-19-2004 90039 016 ***150.00



03112004 No Chg-P CR2E034 (10/03)

4. FEI Number
46-0499998

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

CEBALLOS, GERARDO J
11701 NW 102ND RD.
SUITE #14
MEDLEY, FL 33178

**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 resigning)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 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	CEBALLOS, GERARDO J
STREET ADDRESS	11701 NW 102ND RD., STE 14
CITY-ST-ZIP	MEDLEY, FL 33178
TITLE	VD
NAME	CEBALLOS, JORGE W
STREET ADDRESS	11701 NW 102ND RD., STE 14
CITY-ST-ZIP	MEDLEY, FL 33178
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/15/04