



# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 22, 2004 8:00 am**  
**Secretary of State**

04-22-2004 90070 026 \*\*\*150.00

<b>DOCUMENT # P02000102834</b> 1. Entity Name <b>FJC INVESTMENTS, INC</b>																							
Principal Place of Business <b>1246 NW 125 TERRACE SUNRISE, FL 33323</b>			Mailing Address <b>1246 NW 125 TERRACE SUNRISE, FL 33323</b>																				
2. Principal Place of Business <b>4210 12 ST SW</b> <small>Suite, Apt. #, etc.</small>		3. Mailing Address <b>4210 12 ST SW</b> <small>Suite, Apt. #, etc.</small>																					
City & State <b>Vero Beach, FL</b> Zip <b>32968</b> Country <b>USA</b>		City & State <b>Vero Beach, FL</b> Zip <b>32968</b> Country <b>USA</b>		4. FEI Number <b>13-4212225</b>																			
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>																							
6. Name and Address of Current Registered Agent  <b>JOSEPH, FRED 1246 NW 125 TERRACE SUNRISE, FL 33323</b>			7. Name and Address of New Registered Agent Name <b>Joseph, Fred (address change)</b> Street Address (P.O. Box Number is Not Acceptable) <b>4210 12 ST SW</b> City <b>VERO Beach</b> <b>FL</b> Zip Code <b>32968</b>																				
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 _____																							
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>																					
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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:**  **Fred Joseph (president)** **4-19-04** **754-581-2667**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #