

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000115059

FILED
Apr 26, 2003
Secretary of State

Entity Name: A & J ENDEAVORS INC.

Current Principal Place of Business:

4383 SEABREEZE DRIVE
JACKSONVILLE, FL 32250

New Principal Place of Business:

Current Mailing Address:

4383 SEABREEZE DRIVE
JACKSONVILLE, FL 32250

New Mailing Address:

FEI Number: 51-0431514

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WARFEL, RICHARD
4383 SEABREEZE DRIVE
JACKSONVILLE, FL 32250

Name and Address of New Registered Agent:

JOHNSON, ASHTON
4192 CLOVE ST.
MIDDLEBURG, FL 32243

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.

SIGNATURE: ASHTON JOHNSON

04/26/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WARFEL, JOANNA T
Address: 4383 SEABREEZE DRIVE
City-St-Zip: JACKSONVILLE, FL 32250

Title: STD (X) Delete
Name: WARFEL, RICHARD
Address: 4383 SEABREEZE DRIVE
City-St-Zip: JACKSONVILLE, FL 32250

Title: VD (X) Delete
Name: JOHNSON, ASHTON
Address: 4192 CLOVE STREET
City-St-Zip: MIDDLEBURG, FL 32243

Title: D (X) Delete
Name: JOHNSON, MARGARET
Address: 4192 CLOVE STREET
City-St-Zip: MIDDLEBURG, FL 32243

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: JOHNSON, ASHTON
Address: 4192 CLOVE STREET
City-St-Zip: MIDDLEBURG, FL 32243

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ASHTON JOHNSON

PD

04/26/2003

Electronic Signature of Signing Officer or Director

Date