## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000079956

Entity Name: A & J MINIELY ENTERPRISES, INC.

FILED Jul 15, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9119 TAFT ST

PEMBROKE PINES, FL 33024

Current Mailing Address: New Mailing Address:

9119 TAFT ST

PEMBROKE PINES, FL 33024

FEI Number: 56-2379452 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ARIAS, JUAN R ARIAS, JUAN R

4001 SW 72ND WAY 1821 NW 96TH TERR

DAVIE, FL 33314 PEMBROKE PINES, FL 33024 US

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: JUAN ARIAS 07/15/2004

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP ( ) Delete Title: DP (X) Change ( ) Addition

 Name:
 ARIAS, JUAN R
 Name:
 ARIAS, JUAN R

 Address:
 4001 SW 72ND WAY
 Address:
 1821 NW 96TH TERR

City-St-Zip: DAVIE, FL 33314 City-St-Zip: PEMBROKE PINES, FL 33024 US

Title: DV () Delete Title: DV (X) Change () Addition

 Name:
 RIVAS, AMANDA R
 Name:
 RIVAS, AMANDA R

 Address:
 4001 SW 72ND WAY
 Address:
 1821 NW 96TH TERR

City-St-Zip: DAVIE, FL 33314 City-St-Zip: PEMBROKE PINES, FL 33024 US

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: AMANDA RIVAS DV 07/15/2004