DOCUMENT # P03000082205



FILED Apr 30, 2004 8:00 am Secretary of State

1. Entity Name S & J MANAGEMENT GROUP, INC.			04-30-2004 90286 017 ***150.00				
Principal Place of Business 5115 NW 17TH TERR 39A FT LAUDERDALE, FL 33309	Mailing Address 5115 NW 17TH TERR 39 FT LAUDERDALE, FL 333					·	(SE) 4 (SE)
Principal Place of Business Address Address							
Suite, Apt. #, etc.	Suite, Apt. #, etc.		04202004	Chg-P	CR2E03	34 (10/03)	
City & State	City & State		4. FEI Number				plied For t Applicable
Zip Country	Zip	Country	5. Certificate of	Status Desired		8.75 Add	itional
6. Name and Address of Current	Registered Agent		7. Name and Ac	idress of New R	egistered A	gent	
PAPAGEORGE, SPYROS		Name					Į
5115 NW 17TH TERR 39A FT LAUDERDALE, FL 33309		Street Address	(P.O. Box Number is	s Not Acceptable)		
· · · · · · · · · · · · · · · · · · ·		City	 .		FL	Zip Code)
The above named entity submits this statement for the obligations of registered agent.	the purpose of changing its re	l egistered office or regist	ered agent, or both,	in the State of Flo		amiliar with,	and accept
SIGNATI IBE							
Signature, typed or printed name of registered agent in	and title if applicable. (NOTE: f	Registered Agent signature requir	ed when reinstating)		DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.0	9. Election Campaign Trust Fund Contrib		5.00 May Be Ided to Fees				
10. OFFICERS AND	DIRECTORS	11.	ADDITIONS/CH	ANGES TO OFF	CERS AND	DIRECTORS	SIN 11
TITLE D	☐ Delete	TISTLE		Ē		Change .	Addition
NAME PAPAGEORGE, SPYROS STREET ADDRESS 5115 NW 17TH TERR 39A		NAME STREET ADDRESS					ļ
CITY-ST-ZIP FT LAUDERDALE, FL 33309		CITY-ST-ZIP					
TITLE	☐ Delete	TITLE	-			Change	☐ Addition
NAME STREET ADDRESS		NAME Street address					
City-St-ZiP		CHTY-ST-ZIP					
TITLE	☐ Delete	TITLE				Change	Addition
NAME STREET ADDRESS	•	NAME STREET ADDRESS					
CITY-ST-ZIP		CITY-ST-ZIP					
TITLE	☐ Delete	TITLE				☐ Change	☐ Addition
NAME STREET ADDRESS		NAME STREET ADDRESS					
CITY-ST-ZIP	•	CITY-ST-ZIP					
TITLE .	· Delete	TITLE				☐ Change	☐ Addition
NAME STREET ADDRESS		NAME STREET ADDRESS					
CITY-ST-ZIP		CITY-ST-ZIP					,
TITLE	☐ Delete	TITLE				☐ Change	Addition
NAME STREET ADDRESS .		NAME STREET ADDRESS					
CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with indicated on this report or supplemental report is of the corporation or the receiver or trustee emportanged, or on an attachment with an address, and the corporation of the receiver or trustee.	this filing does not qualify for the true and accurate and that my owered to execute this report as with all others.	he exemption stated in S signature shall have the s required by Chapter 6	Section 119.07(3)(i), le same legal effect a 07, Florida Statutes;	Florida Statutes. Is if made under dand that my name	I further cert bath; that ‡ a appears in	ify that the ir m an officer Block 10 or	or director Block 11 if
	With all other like empowered. PYROS VH PAGEO R						