2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03289

Address:

City-St-Zip:

5464 BLOOMFIELD BLVD

LAKELAND, FL 33810 US

FILED Apr 14, 2005 Secretary of State

Entity Na	me: CJPAI	LLET CO., INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	TAMPA HW D, FL 33811				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	TAMPA HW D, FL 33811				
FEI Number	: 58-1491506	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
LAKELANI	TAMPA HW D, FL 33811	1108 US			
	named entit e of Florida.	y submits this statement for the	e purpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Agent			gent	Date	
Election Car	mpaign Financ	ing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PTD HERBERT, C 5222 BLOOM LAKELAND, I	IFIELD BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:			Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	2VP BLAEUER, C	()Delete INDY H,	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: CINDY H. BLAEUER 2 VP 04/14/2005