

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000024890

Entity Name: CAJ SCOOTERS, INC

**FILED**  
**Jan 08, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

523 TRUMAN  
KEY WEST, FL 33040

**New Principal Place of Business:**

**Current Mailing Address:**

523 TRUMAN  
KEY WEST, FL 33040

**New Mailing Address:**

FEI Number: 90-0142189

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NEWCOMB, JASON  
523 TRUMAN  
KEY WEST, FL 33040 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PT  
Name: NEWCOMB, JASON  
Address: 523 TRUMAN  
City-St-Zip: KEY WEST, FL 33040

Title: SV  
Name: HETU, ANDREW A  
Address: 3675 SEASIDE DR #134  
City-St-Zip: KEY WEST, FL 33040

I hereby 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 all other like empowered.

SIGNATURE: JASON NEWCOMB

PRES

01/08/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date