## 2006 FOR PROFIT CORPORATION

## Jan 31, 2006 08:00 AM **ANNUAL REPORT Secretary of State** DOCUMENT # P04000066763 A & J LANDHOLDINGS, INC. Principal Place of Business Mailing Address 3021 NE 46TH ST. 3021 NE 46TH ST. FT. LAUDERDALE, FL 33308 FT. LAUDERDALE, FL 33308 CR2E034 (11/05) 01242006 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 90-0167406 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LEMBO, JOHN DO NOT WRITE 3021 NE 46TH ST. FT. LAUDERDALE, FL 33308 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Squature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) OATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. LEMBO, JOHN NAME STREET ADDRESS 3021 NE 46TH ST. FT. LAUDERDALE, FL 33308 ENTY-SI-202 TITLE U00000411759 02/10/06-80020-021 150.00 NAME STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

**FILED** 

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an aparters with all other like empowered.

SIGNATURE:

STREET ADDRESS

CITY ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP SIBLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-78

E OF SIGNING OFFICER OR DIRECTOR