


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 12, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P04000111555</b>	
1. Entity Name ESJ, INC.	

Principal Place of Business 12133 COLONIAL ESTATES LANE RIVERVIEW, FL 33569	Mailing Address 12133 COLONIAL ESTATES LANE RIVERVIEW, FL 33569
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**DO NOT WRITE IN THIS SPACE**

02242008 No Chg-P CR2E034 (11/05)

4. FEI Number 54-2159974	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent  SMITH, M. ELAINE 12133 COLONIAL ESTATES LANE RIVERVIEW, FL 33569	<b>DO NOT WRITE IN THIS SPACE</b>
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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: *M. Elaine Smith* 3/9/08  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	000000856367 03/28/08-80009-003 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDVS SMITH, M. ELAINE 12133 COLONIAL ESTATES LANE RIVERVIEW, FL 33569
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**DO NOT WRITE  
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12. I hereby certify that the information supplied with this filing 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 address, with all other like empowered.

SIGNATURE: *M. Elaine Smith* 3/9/08 8132930456  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #