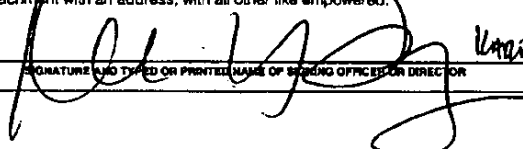


FILED
Aug 19, 2005 8:00 am
Secretary of State

07-26-2005 90025 024 ***150.00

2005 FOR-PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P04000141807			
1. Entity Name KJG, INC.			
Principal Place of Business 407 WEKIVA SPRINGS ROAD SUITE 115 LONGWOOD, FL 32779 US		Mailing Address 407 WEKIVA SPRINGS ROAD SUITE 115 LONGWOOD, FL 32779 US	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
5. Certificate of Status Desired ☐ : \$8.75 Additional Fee Required		4. FEI Number 693785824 Applied For ☐ Not Applicable ☐	
6. Name and Address of Current Registered Agent DEVINNEY, KAREN E 407 WEKIVA SPRINGS ROAD SUITE 115 LONGWOOD, FL 32779		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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: _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____			
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D DEVINNEY, KAREN E 407 WEKIVA SPRINGS ROAD LONGWOOD, FL 32779 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/D BUTZ, ELIZABETH W 407 WEKIVA SPRINGS ROAD LONGWOOD, FL 32779 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DEVINNEY, KAREN E 407 WEKIVA SPRINGS ROAD LONGWOOD, FL 32779 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BUTZ, ELIZABETH W 407 WEKIVA SPRINGS ROAD LONGWOOD, FL 32779 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify 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 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: 		Date 7/20/05 Daytime Phone # 407-662-4200	