


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED  
May 01, 2006 08:00 AM  
Secretary of State

DOCUMENT # P04000146877  
1. Entity Name  
LJD ENTERPRISES INC.



Principal Place of Business 3306 ABEL AVE PACE, FL 32571	Mailing Address 3306 ABEL AVE PACE, FL 32571
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04222006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

A. FEI Number 20-2082610	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  
DAVIS, LINDA  
3306 ABEL AVE  
PACE, FL 32571

DO NOT WRITE 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

000007549619  
05/13/06-81028-022 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVIS, JAMES 3306 ABEL AVE PACE, FL 32571
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVIS, LINDA 3306 ABEL AVE PACE, FL 32571
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: Linda Davis Linda Davis owner 4-27-06 (850) 516-5398  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #