## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## Feb 19, 2007 08:00 AM DOCUMENT # P04000171113 **Secretary of State** 1. Entity Name PEJAY ENTERPRISES, INC. Principal Place of Business Mailing Address 3060 NORTH TAMIAMI TRAIL 3060 NORTH TAMIAMI TRAIL SUITE 2 SUITE 2 NAPLES, FL 34103 US NAPLES, FL 34103 US No Chg-P CR2E034 (11/05) 02152007 DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-1250672 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent HART, PETER W DO NOT WRITE 3060 NORTH TAMIAMI TRAIL IN THIS SPACE NAPLES, FL 34103 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) U00000639416 \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! PEE IS \$150.00 02/28/07-80026-005 150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10, OFFICERS AND DIRECTORS TITLE HART, PETER NAME STREET ADDRESS 4230 HAWAII BLVD CITY-ST-ZIP NAPLES, FL 34112 VP/S TITLE LUCE, JACKIE NAME STREET ADDRESS 4230 HAWAII BLVD CETY-ST-ZIP NAPLES, FL 34112 TITLE NAME LUCE, JACKIE STREET ADDRESS 4230 HAWAII BLVD DO NOT WRITE CITY-ST-ZIP NAPLES, FL 34112 IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 is changed, or on an attachment with an address, with all office the empower of the corporation of the corporation

SIGNATURE:

STREET ADORESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daylime Phone #

FILED