

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000012459

Entity Name: C.J.'S SANDWICH SHOP, INC.

FILED
Apr 20, 2009
Secretary of State

Current Principal Place of Business:

12000 GULF BLVD
SAINT PETERSBURG, FL 33706

New Principal Place of Business:

12000 GULF BLVD
TREASURE ISLAND, FL 33706

Current Mailing Address:

2938 HEATHER TRAIL
CLEARWATER, FL 33761

New Mailing Address:

FEI Number: 20-2254099 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLEJNIK, CYNTHIA
2938 HEATHER TRAIL
CLEARWATER, FL 33761 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: OLEJNIK, CYNTHIA
Address: 2938 HEATHER TRAIL
City-St-Zip: CLEARWATER, FL 33761

Title: DVP () Delete
Name: OLEJNIK, JOHN
Address: 2938 HEATHER TRL
City-St-Zip: CLEARWATER, FL 33761

Title: TD () Delete
Name: OLEJNIK, HEATHER
Address: 2935 HEATHER TR
City-St-Zip: CLEARWATER, FL 33761

Title: SD () Delete
Name: OLEJNIK, JONATHAN
Address: 2938 HEATHER TR
City-St-Zip: CLEARWATER, FL 33761

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CYNTHIA OLEJNIK

DP

04/20/2009

Electronic Signature of Signing Officer or Director

Date