


PROFIT CORPORATION

FILED
Apr 02, 2007 8:00 am
Secretary of State

04-02-2007 90081 003 ***150.00

DOCUMENT # P05000032105 1. Entity Name J AND N INVESTMENT ENTERPRISES, INC.					
Principal Place of Business 4790 NW 20TH STREET LAUDERHILL, FL 33313 US			Mailing Address 4790 NW 20TH STREET LAUDERHILL, FL 33313 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEJ Number 20-4416926	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ROUNDTREE ROBERT H 1745 N. STATE ROAD 7 MARGATE, FL 33063			7. Name and Address of New Registered Agent Name JOSEPH FAGAN Street Address (P.O. Box Number is Not Acceptable) 4790 NW 20 STREET City LAUDERHILL FL Zip Code 33313		
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 <u>Joseph Fagan</u> (NOTE: Registered Agent signature required when registration) 3/22/07					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	P FAGAN, JOSEPH SR. 4790 NW 20TH STREET LAUDERHILL, FL 33313 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VP FAGAN, HAVOLINE 4790 NW 20TH STREET LAUDERHILL, FL 33313 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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: Joseph Fagan 3.22.07

40046624



03222007 Chg-P CR2E034 (12/06)

4. FEJ Number
20-4416926

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

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