2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2009
Secretary of State

DOCUMENT# P06000053833

Entity Name: PJN ENTERPRISES, INC.

Current Principal Place of Business:

12247 92ND TERR. NORTH
SEMINOLE, FL 33772

New Principal Place of Business:

Current Mailing Address:

12247 92ND TERR. NORTH
SEMINOLE, FL 33772

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BROIDA, JOEL D ESQ.
605-75TH AVE.
ST. PETE BCH, FL 33706 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: D ( ) Delete
Name: BOSSONE, JOHN
Address: 12247 92ND TERR. NORTH
City-St-Zip: SEMINOLE, FL 33772

Title: D ( ) Delete
Name: BOSSONE, JACQUELYN
Address: 145 RYEGATE RD.
City-St-Zip: FAIRFIELD, CT 06824

Title: D ( ) Delete
Name: MANALY, DONALD
Address: 2394 W. 119TH AVE.
City-St-Zip: WESTMINSTER, CO 80234

Title: D ( ) Delete
Name: MANALY, JILL
Address: 2394 W. 119TH AVE.
City-St-Zip: WESTMINSTER, CO 80234

Title: D ( ) Delete
Name: KRYGIER, PAUL
Address: 203 180TH AVE. EAST
City-St-Zip: REDINGTON SHORES, FL 33708

Title: D ( ) Delete
Name: KRYGIER, LAURA
Address: 203 180TH AVE. EAST
City-St-Zip: REDINGTON SHORES, FL 33708

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:

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: PAUL J. NETTE, JR. PRES 04/20/2009

Electronic Signature of Signing Officer or Director Date