2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000061706

Entity Name: SEJ HOLDINGS INC.

FILED May 01, 2007 Secretary of State

1131 DE LA PAIX ST. 1035 CHOMEDEY BLVD

ST-SAUVEUR, QU J0R 1R2 CA 11 LAVAL, QU H7V 3R9 CA

Current Mailing Address: New Mailing Address:

1131 DE LA PAIX ST.

ST-SAUVEUR, QU JOR 1R2 CA

651 GIRAUD STREET
LAVAL, QU H7X 3J3 CA

FEI Number: 98-0498326 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

INCORPORATE FLORIDA, INC

1428 BRICKELL AVENUE
PH
MIAMI, FL 33131 US

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1428 BRICKELL AVENUE
PH
MIAMI, FL 33131 US

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: JESSICA MEDINA 05/01/2007

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: LAPIERRE, ERIC Name: LAPIERRE, ERIC

Address: 1131 CH DE LA PAIX Address: 15220 DES PRUCHES ST.
City-St-Zip: ST-SAUVEUR, QU J0R1R2 CA City-St-Zip: MIRABEL, QU J7N 126 CA

Title: VPD () Delete Title: () Change () Addition

 Name:
 LAPIERRE, STEVE
 Name:

 Address:
 651 GIRAUD ST.
 Address:

 City-St-Zip:
 LAVAL, QU H7X 3J3 CA
 City-St-Zip:

Title: SD () Delete Title: () Change () Addition

 Name:
 LAPIERRE, JULIE
 Name:

 Address:
 1161 CLOS DES JACOBINS
 Address:

 City-St-Zip:
 PREVOST, QU JOR 1T0 CA
 City-St-Zip:

Title: T (X) Delete Title: () Change () Addition

 Name:
 LAPIERRE, DANIEL
 Name:

 Address:
 56 LAFLEUR AVE.
 Address:

 City-St-Zip:
 ST-SAUVEUR, QU JOR 1R0 CA
 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: STEVE LAPIERRE VPD 05/01/2007