

## **2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P06000090459

Entity Name: E & J OF SOUTH FLORIDA INC

**FILED**  
**Jun 25, 2009**  
**Secretary of State**

**Current Principal Place of Business:**

9369 SHERIDAN STREET SUITE 903  
COOPER CITY, FL 33024

**New Principal Place of Business:**

5706 RODMAN STREET  
HOLLYWOOD, FL 33023

**Current Mailing Address:**

9369 SHERIDAN STREET SUITE 903  
COOPER CITY, FL 33024

**New Mailing Address:**

5706 RODMAN STREET  
HOLLYWOOD, FL 33023

FEI Number: 20-5200519

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

AZRIKAN, LYNDA  
9369 SHERIDAN STREET SUITE 903  
COOPER CITY, FL 33024 US

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

AZRIKAN, LYNDA  
5706 RODMAN STREET  
HOLLYWOOD, FL 33023 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: LYNDA AZRIKAN

06/25/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D. ( ) Delete  
Name: AZRIKAN, LYNDA  
Address: 8643 BLAZE COURT  
City-St-Zip: DAVIE, FL 33328

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: AZRIKAN, LYNDA  
Address: 5706 RODMAN STREET  
City-St-Zip: HOLLYWOOD, FL 33023

Title: D ( ) Change (X) Addition  
Name: HESSEIN, MARK  
Address: 5706 RODMAN STREET  
City-St-Zip: HOLLYWOOD, FL 33023

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: LYNDA AZRIKAN

D

06/25/2009

Electronic Signature of Signing Officer or Director

Date