

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 20, 2008 8:00 am
Secretary of State

05-20-2008 90052 001 ***150.00
05-20-2008 90052 002 ****35.00

DOCUMENT # P06000112144

1. Entity Name
EM JAY ENTERPRISES INC.



Principal Place of Business
**6465 99TH WAY NORTH, STE. 17-C
ST. PETERSBURG, FL 33708**

Mailing Address
**6465 99TH WAY NORTH, STE. 17-C
ST. PETERSBURG, FL 33708**

DO NOT WRITE IN THIS SPACE



02032008 No Chg-P CR2E034 (11/05)

4. FEI Number
41-2213392

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**KYNION, STEPHEN L
6822 22ND AVE. N
#424
ST. PETERSBURG, FL 33710**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **D**
NAME **GREY, MARY JO**
STREET ADDRESS **6465 99TH WAY NORTH, STE. 17-C**
CITY-ST-ZIP **ST. PETERSBURG, FL 33708**

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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: **MARY JO GREY, PRES.**

Date

Daytime Phone #

727

393-6274

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS

ATTACHMENT

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: EM JAY ENTERPRISES INC
2. The principal office address: 6465 99th WAY NORTH, 17-C
ST. PETERS BURG, FL 33708
3. The mailing address (if different): _____

4. Date of incorporation/qualification: AUG 2006 Document number: P06000112144
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

STEPHEN L. KYNION
6822 22nd AVE. N.
#424 ST. PETERS BURG, FL 33710

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

JEFFREY A. DE MAURO
4870 53rd TERRACE NORTH
(P.O. Box NOT acceptable)
SAINT PETERS BURG, FL 33714

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Mary Jo Grey, President
(Signature of an officer or director)

MARY JO GREY, President
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Jeffrey A. De Mauro
(Signature of Registered Agent)

4-27-08
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)