

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000069526

FILED
May 12, 2008
Secretary of State

Entity Name: CJF INVESTMENT GROUP INC

Current Principal Place of Business:

3170 NW 122 AVENUE
SUNRISE, FL 33323 US

New Principal Place of Business:

Current Mailing Address:

3170 NW 122 AVENUE
SUNRISE, FL 33323 US

New Mailing Address:

FEI Number: 26-0354518

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLORVILUS, WATSON
6005 DEL LAGO CIRCLE
103
SUNRISE, FL 33313 US

Name and Address of New Registered Agent:

CAPE COD MANAGEMENT SERVICES INC
314 NE 27TH STREET
WILTON MANORS, FL 33334 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: APRIL PEACH CONDRON

05/12/2008

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:

Title: VP () Delete
Name: FLORVILUS, WATSON
Address: 6005 DEL LAGO CIRCLE #103
City-St-Zip: SUNRISE, FL 33313 US

Title: P () Delete
Name: CINEUS, MARIE
Address: 3170 NW 122 AVENUE
City-St-Zip: SUNRISE, FL 33323 US

Title: S () Delete
Name: JULES, LORA
Address: 3170 NW 122 AVENUE
City-St-Zip: SUNRISE, FL 33323 US

Title: T () Delete
Name: JULES, GINA
Address: 2014 LITTLE TORCH STREET
City-St-Zip: WEST PALM BEACH, FL 33407 US

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:

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: WATSON FLORVILUS

VP

05/12/2008

Electronic Signature of Signing Officer or Director

Date