

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000015489

Entity Name: NAPEJ, INC.

FILED
Jul 13, 2004
Secretary of State

Current Principal Place of Business:

1402 U.S. ALT. 19
HOLIDAY, FL 34691

New Principal Place of Business:

Current Mailing Address:

1402 U.S. ALT. 19
HOLIDAY, FL 34691

New Mailing Address:

FEI Number: 59-3172123

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOUSKOTIS, MICHAEL PA
623 E. TARPON AVE.
TARPON SPRINGS, FL 34689 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: C () Delete
Name: KARAS, MICHAEL N
Address: 6528 JOSIE LN
City-St-Zip: HUDSON, FL

Title: P () Delete
Name: KARAS, ARGYRO
Address: 18244 NARDY
City-St-Zip: CLINTON TOWNSHIP, MI 48036

Title: V () Delete
Name: KARAS, NICHOLAS
Address: 6528 JOSIE LN
City-St-Zip: HUDSON, FL 34667

Title: S () Delete
Name: KARAS, JOHN S
Address: 6528 JOSIE LN
City-St-Zip: HUDSON, FL

Title: D () Delete
Name: KARAS, MARIA
Address: 6528 JOSIE LN
City-St-Zip: HUDSON, FL

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOHN KARAS

SECE

07/13/2004

Electronic Signature of Signing Officer or Director

Date