## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT CORPOFIATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

1. Corporation	VIENI Name	# P930	UUU45	965 (S	<del>)</del> )						
E.J.P. ENTERPRISES, INC.											
F-0-1	. 61116111	THOLO, MO,						1884  667 678 1886	770 <b>44</b> 00 <b>44</b> 00 <b>4</b>		
Principal Place of Business Mailing Address											
·			ŭ	·							
	207TH COUF XN FL 34431	{I		7310 S.W. 207TH COURT DUNNELLON FL 34431							
								3. Date Incorporated or Qualif	ied 3a. C	ate of Last	Report
								06/22/1993		04/28/	/1995
2. Principal Place of Business				2a. Mailing Address				4. FEI Number Applied For			
21 Suite, Apt. #, etc.			26 Suite	Suite, Apt. #, etc.				59-3187576 Not Applicable  5 Cadificate of Status Pagind P			
22 Suite, Apt. 1	#, etc.		<b>⊢</b> −¬	27				5. Certificate of Status Desired Fee Required			
City & State				City & State			6. Election Campaign Financing \$5.00 May Be				
23			28	- <del></del>				Trust Fund Contribution Added to Fees			
Zφ	<b>F</b> —		Zip	-¬ ' <b> -</b> ¬		Country		This corporation has liability     Florida Statutes	∕ for intangibl Yes □ No	e tax under	s 199.032,
24	g. Name	25 and Address of Curre		<u> </u>				10. Name and Address of New Registered Agent			
					81	Nar	ne			<del>-</del>	
PETERSON, EDWARD J					82	Stre	et Addres	ss (P.O. Box Number is Not Acce	eptable)		
7310 \$	S.W. 207Th	I COURT							· · · · · · · · · · · · · · · · · · ·		
DUNNELLON FL 34431						ĺ					
					84	City	,		F	85	Zip Code
11. Pursuant t	to the provisi	ons of Sections 607.050	2 and 607 150	8, Florida Statute	s, the above-r	name	d corporal	tion submits this statement for th	e purpose of	changing it	s registered office
or register	ed agent, or	both, in the State of Flor pt the obligations of, Sec	ida. Such chari	ige was authorize	id by the corp	oratio	n's board	of directors. I hereby accept the	appointment	as register	ed agent. I am
SIGNATURE		· · · · · · · · · · · · · · · · · · ·									
12.	Signature, typed	or printed name of registered agen	t and title if applicabl ID DIRECTORS		E: Registered Ager	nt sigmal	ure required s	when reinstating)  ADDITIONS/CHANGES TO	OFFICERS A		TORS IN 12
TITLE	α	01710371070	ID DIVICOTORIO	DELETE	1. 1 TiTLE			ADDITIONS/OFFINIOUS TO	OFFICEROS	☐ Chang	
NAME		RSON, EDWARD J		_	1.2 NAME						
STREET ADDRESS				1.3 STREET ADDRESS			ss				
CITY - ST - ZIP	TY-ST-ZIP <b>DUNNELLON FL 34431</b>				1.4 CITY-ST-ZIP						
TITLE				☐ DEFEIE	2 1 TITLE		į			☐ Chang	je 🔲 Addition
NAME					22 NAME		į				
STREET ADDRESS					2 3 STREET		SS				
CITY ST-ZIP	ļ			DELETE	24 CITY-S	T - ZIP				Chang	e 🔲 Addition
TITLE					3 1 TITLE 3.2 NAME					[_] Chang	e L Manton
NAME CLOCET ADORECE					3.3. STREE	T ADDO	ree				
STREET ADDRESS					3.5. STREC		133				
CITY-\$1-ZIP TITLE				DELETE	4. 1 TITLE	)   - ZH				Chang	ge 🔲 Addition
NAME				-	4.2 NAME						.—
STREET ADDRESS					4.3 STREET	ADORE	SS				
CITY - ST - ZIP					4.4 CITY - S	T-ZIP					
TITLE				DELETE	5. 1 71TLE					Chang	ge 🔲 Addition
NAME					5 2 NAME						
STREET ADDRESS					5.3 STREET	ADDRE	:\$\$				
CITY-ST-ZIP	ļ				5.4 CITY - S	T-ZIP					
TITLE				☐ DELETE	6. 1 TITLE					☐ Chang	ge 🔲 Addition
NAME					6.2 NAME						
STREET ADDRESS					6.3 \$TREET		SS				
CHTY-ST-ZIP	L				6.4 CITY - S	sf-ZIF					

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed or en an attachment with an address.

SIGNATURE:

E.J. Peterson

4-23-96 Date

904-489-2115 Dayting Phone #