Apr 12, 1999 8:00 am Secretary of State

04-12-1999 90049 017 \*\*\*150.00

## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000049638

1. Corporation Name

CBJ REALTY, INC.

Principal Plac	ce of Business	Ma	ailing Address							
C/O CHRIS JO			CHRIS JONES			,	·			
9612 NW 41 STREET 9612 NW 41 STREET			*			DO NOT WRITE	N THIS !	SPACE		
SUNRISE FL 33313 SUNRISE FL 33313 US US						DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified				
03		03					07/09/1993			
2. Principal F	Place of Business	2a.	Mailing Address				4. FEI Number			Applied For
21 .		26					65-0425154			lot Applicable
Suite, Apt	. #, etc.		Suite, Apt. #, etc.				5. Certifcate of Status Desired	1	+	Additional
22 - City & Sta		27			,		<b>0</b> , <b>0</b>			Required
City & Sta	te ** **	ىند سامند <sup>ب</sup>	City & State		- '		6. Election Campaign Financing	 ]		May Be
23		28					Trust Fund Contribution			to Fees
Zip	Country	$\Box$	Zip		untry	,	8. This corporation owes the current	ear Inta		
24	25	29		30	_		Personal Property Tax.		□Yes	□No
	9. Name and Address of Curr	ent Regis	tered Agent		-		10. Name and Address of New Regi	stered A	gent	
ION	IEC CHDIC				81	Name				
JONES, CHRIS 9612 NW 41 STREET					82	Street Ad	ddress (P.O. Box Number is Not Acceptable)			
,	_ · · · · · · · · · · · · · · · · · · ·									
Sur	NRISE FL 33313				83					
					84	City			85 Zij	Code
1	•				1	1	orporation submits this statement for the pur	F <u>L</u>	11	
SIGNATURE	Signature, typed or printed name of registered a				_	nt signature requ		DATE		
12.	OFFICERS /	AND DIRE		13		<del></del>	ADDITIONS/CHANGES TO OFFIC	RS AN	☐ Change	
TITLE	D		☐ DELETE		TITLE				L.; Criangi	Addition
NAME	JONES, CHRIS			1	NAME			•		
STREET ADDRESS				1.3	STREE	TADORESS				
CITY-ST-ZIP	SUNRISE FL				CITY-S	T-ZIP			[ ] Ob	Addition
TITLE			☐ DELETE	2.1	TITLE				Change	Addition
NAME		•		2.2	NAME	ì				
STREET ADDRESS	· ·			2.3	STREE	TADORESS	•			
CITY-ST-ZIP				_	CITY-S	ST-ZIP				T A JUR -
- TITLE			·· · • DELETE	3.1	TITLE				☐ Change	Addition
NAME				3.2	NAME					
STREET ADDRESS	S			3.3	STREE	TADDRESS				
CITY-ST-ZIP				_	CITY-S	ST-ZIP				
TITLE			☐ DELETE		TITLE	-			Change	Addition
NAME				4. 2	NAME					
STREET ADDRESS	· ·			4.3	STREE	T ADDRESS				
CITY-ST-ZIP				4.4	CITY-S	T-ZIP				
TITLE			DEFELE	5.1		1			Chang	
NAME					TTLE					Addition
STREET ADDRESS	s			5.2	NAME					Addition
CITY-ST-ZIP	1			5.2 5.3	NAME STREE	TADDRESS				Addition
TITLE			<u> </u>	5.2 5.3 5.4	name Stree City-s		•			
""LE			☐ DELETE	5.2 5.3 5.4 6.1	NAME STREE CITY-S TITLE		,		☐ Chang	
NAME			☐ DELETE	5.2 5.3 5.4 6.1 6.2	NAME STREE CITY-S TITLE NAME				☐ Chang	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 on supplement with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

MURE REQUIRED