FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

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

APPROVED AND FILED

95 MAY -1 AM 8:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # **P93000050624 (4)**

1. Corporation Name
CJN ENTERPRISES, INC.

Principal Place of Business
12401 W OKEECHOBEE RD
LOT 153
HIALEAH GARDENS FL 33016

Mailing Address
12401 W OKEECHOBEE RD
LOT 153
HIALEAH GARDENS FL 33016

3. Date Incorporated or Qualified: **07/14/1993**
3a. Date of Last Report: **05/01/1994**

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite Apt # etc — 22 / 27
City & State — 23 / 28
Zip — 24 / 29
Country — 25 / 30

4. FEI Number: **65-4026525** — Applied For / Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CHIN, NORMA J
12401 W OKEECHOBEE RD
LOT 153
HIALEAH GARDENS FL 33016

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0505 and 607.1508, Florida Statutes, the above named corporation submits the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and I accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	VP
NAME	CHIN, NORMA J
STREET ADDRESS	12401 W OKEECHOBEE RD #153
CITY, ST, ZIP	HIALEAH GARDENS FL
TITLE	VP
NAME	NENGEL, ALAN S NENGEL
STREET ADDRESS	12401 W OKEECHOBEE RD #153
CITY, ST, ZIP	HIALEAH GARDENS FL
TITLE	VP
NAME	SEOW, MICHAEL
STREET ADDRESS	46-55 157TH STREET
CITY, ST, ZIP	FLUSHING NY
TITLE	VP
NAME	SEOW, ANDREW
STREET ADDRESS	46-55 157TH STREET
CITY, ST, ZIP	FLUSHING NY
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

☐ Change ☐ Addition
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☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

14. I hereby certify that the information supplied with this report is voluntarily furnished and 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 the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on a separate attached sheet with an address.

SIGNATURE: 4/26/95
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

000006 CP