SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1996.
AMOUNT DUE ON OR BEFORE 8/9/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT
1995

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

FILED
95 AUG 10 AM 11:51
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # **P93000060288 (6)**

1. Corporation Name
PJ & ME, INC.

Principal Place of Business	Mailing Address
2421 SE OCEAN BLVD. DBA TRICA'S HALLMARK STUART FL 34996 US	9940 S OCEAN DR JENSEN BEACH FL 33457

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified	3a. Date of Last Report
	9940 S. Ocean Dr	08/25/1993	07/06/1994
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number	Applied For / Not Applicable
	#807	65-0405890	
City & State 23	City & State 28	5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
	JENSEN BEACH		
Zip 24 / Country 25	Zip 29 / Country 30	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
	34957 / USA		
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

CAWTHORNE, SUSAN J
50 KINDRED ST
TWO FIRST NATIONAL CENTER
STUART FL 34994

10. Name and Address of New Registered Agent

61 Name

62 Street Address (P.O. Box Number is Not Acceptable)

63

64 City **FL** 65 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this 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 accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DST	1.1 TITLE	DST ☒ Change ☒ Addition
NAME	BALL, JOHN	1.2 NAME	BALL, JOHN C, Jr
STREET ADDRESS	9940 S OCEAN DR	1.3 STREET ADDRESS	9940 S. OCEAN DR #807
CITY-ST-ZIP	JENSEN BEACH FL 34957	1.4 CITY-ST-ZIP	JENSEN BEACH, FL 34957
TITLE	DP	2.1 TITLE	DP ☒ Change ☐ Addition
NAME	BALL, PATRICIA	2.2 NAME	BALL, PATRICIA C
STREET ADDRESS	9940 S OCEAN DR	2.3 STREET ADDRESS	9940 S. OCEAN Dr # 807
CITY-ST-ZIP	JENSEN BEACH FL 34957	2.4 CITY-ST-ZIP	JENSEN BEACH, FL 34957
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

CR2E034 (3/95)

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)(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 an attachment with an address.

SIGNATURE: _____ 7/27/95 407-286-1888
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL (OFFICER OR DIRECTOR) JOHN C. BALL, JR Date Daytime Phone #

017A31 FP