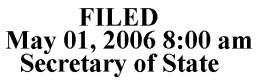
2006 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # P93000071556



DOCUMENT # P93000071556 1. Entity Name CGCJ, INC.					05-01-2006 90346 032 ***150.00				
Principal Plac	ce of Business	Mailing Address			• *				
515 N.E. 4TH STREET		515 NE 4TH ST POMPANO BEACH, FL 33060 US							
2. Principal Place of Business 3.		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04262006	Chg-P	CR2E034 (11/05)			
City & State		City & State		4. FEI Number	LICABLE	 	pplied For ot Applicable		
Zip	Country	Zip	Country		5. Certificate of		\$8.75 Ad	ditional	
	6. Name and Address of Current R	egistered Agent			7. Name and A	ddress of New F	Registered Agent	3G	
				Name					
U.C.C. FILING & SEARCH SERVICES INC. 1574 VILLAGE SQUARE BLVD SUITE 100				Street Address (Street Address (P.O. Box Number is Not Acceptable)				
	SSEE, FL 32309								
			City				FL Zip Cox	de	
8. The above the obligation	named entity submits this statement for tions of registered agent.	the purpose of changing its r	registere	d office or register	ed agent, or both	, in the State of Fl	orida. I am familiar with	, and accept	
SIGNATURE.	Signature, typed or printed name of registered agent an	d fite if smolinethie (NOTE	Perintend	Agent signature required	when reinstations		DATE		
After M	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00		ibution.	·	00 May Be ed to Fees				
DTLE	OFFICERS AND D		11.		ADDITIONS/C	HANGES TO OFF	CERS AND DIRECTOR		
name Street address	SINGLETON-SIMON, JENNIFER 1800 E ATLANTIC BLVD	□ Delete		T ADORESS			Change	☐ Addition	
CITY-ST-ZIP	POMPANO BEACH, FL 33060	☐ Delete	FITLE	\$1-7IP			Change	☐ Addition	
NAME	PETERS, CYNTHIA S	L. Deixe	NAME				<u> Пини</u> е	L_I ADUILION	
STREET ADDRESS CITY-ST-ZIP	20906 ENCANTO COURT BOCA RATON, FL 33433			t adoress ST-ZIP					
TITLE	STD	☐ Delete	TITLE			,	☐ Change	Addition	
name Street address	CLARK, GLENDA 515 N.E. 4TH STREET		NAME	T ADDRESS					
CITY-ST-ZIP	POMPANO BEACH, FL 33060			ST-ZIP					
mæ	D	Defete	TITLE				☐ Change	☐ Addition	
NAME STREET ADDRESS	SINGLETON, CHARLES G JR		NAME STREE	T ADDRESS					
CITY-ST-ZIP	POMPANO BEACH, FL 33060			ST-ZIP					
TITLE		☐ Delete	TITLE				☐ Change	Addition	
NAME STREET ADDRESS			NAME STREE	T ADORESS					
CITY-ST-ZIP			1	ST-ZIP					
TITLE		☐ Delete	TITLE			···	Change	Addition	
NAME STREET ADDRESS			NAME STREE	T ADDRESS					
CITY-ST-ZIP			4	ST-ZIP					
12. I hereby	certify that the information supplied with t	his filling does not qualify for	the exer	mptions contained	I in Chapter 119,	Florida Statutes.	further certify that the	information	

indicates on this report of suppremental report is rule 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.