## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## Mar 19, 2007 08:00 AM DOCUMENT # P94000031934 **Secretary of State** JUNK PROPERTIES OF FLORIDA, INC. Principal Place of Business Mailing Address 7801 SW 6TH COURT 7801 SW 6TH COURT FORT LAUDERDALE, FL 33324 FORT LAUDERDALE, FL 33324 02192007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0494267 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WEINBERG, STEVEN DO NOT WRITE 7205 SW 6 COURT PLANTATION, FL 33324 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title it applicable. (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE LEON, JANICE L NAME STREET ADDRESS 7801 SW 6TH COURT CITY-ST-ZIP PLANTATION, FL 33324 STD TITLE U000000671108 LEON, WILLIAM J NAME 03/28/07-80016-009 158.75 STREET ADDRESS 7801 SW 6TH COURT CITY-ST-ZIP PLANTATION, FL 33324 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 in changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: (

NAME STREET ADDRESS CITY-ST-ZIP

GNATURE AND THEE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/15/07

954-424-3008

**FILED**