## 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

## Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90149 029 \*\*\*150.00

DOCUMENT #	‡	P9400	ገበ	05	25	23
1 Corneration Name		1 0 101		00		

<ol> <li>Corporatio</li> </ol>	n Name						
TJ COM	MUNICATIONS, INC.				N. 4141 17884 8448 11888 1221 1881		
Principal Place	e of Business	Mailing Address			)		
12096 NW 25TH	H ST	12096 NW 25TH ST					
CORAL APRINGS FL 33065 CORAL SPRINGS FL 33065		DO NOT WRITE IN THIS SPACE					
US		US		3. Date Incorporated or Qualifed	O O! AGE		
				07/15/1994			
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For		
21		26		65-0505498	Not Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional		
22		27		5. Certificate of Status Desired	Fee Required		
City & Stat	e	City & State		6. Election Campaign Financing	<b>\$5.00</b> May Be		
23		28		Trust Fund Contribution	Added to Fees		
Zip	Country	Zip	Country	8. This corporation owes the current year l	ntangible ☐ Yes ☐ No		
24	9. Name and Address of Curren		30	Personal Property Tax.			
	9. Name and Address of Curren	it Registered Agent	81 Name	le del Ca Va 'X+			
KEIT	T, JENNIFER			JENNITER REIT			
	MONTARA DRIVE		82 Street Addr	ress (P.O. Box-Number is Not Acceptable)	h sheet		
STE.	#202		83	70,-10	,		
MAR	GATE FL 33063		24 00 2		BE Zin Codo.		
			84 City COL	al SPLINGS FI	L   <sup>85</sup>   39506 5		
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statute of Florida, Such change was au	s, the above-named corp	oration submits this statement for the purpose on's board of directors. I hereby accept the app	of changing its registered ointment as registered		
agent. I a	m familiar with, and accept the obligation	tions of, Section 607.0505, Flori	da Statutes.	/ 6	66		
SIGNATURE	- the	fer feet		1/19/	<u>47</u>		
42	Signature, typed or printed hame of registered ager	and title if applicable. (NOTE: D DIRECTORS	Registered Agent signature required 13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12		
12.	P	DELETE	1.1 TITLE	ADDITIONOUS TO STATE OF	Change Addition		
NAME	KEITT, ANTHONY B	_	1.2 NAME				
STREET ADDRESS	12096 NW 25TH ST		1.3 STREET ADDRESS				
CITY-ST-ZIP	CORAL SPRINGS FL 33065		1.4 CITY-ST-ZIP				
TITLE	V	C DELETE	2.1 TITLE .	•	☐ Change ☐ Addition		
NAME	KEITT, JENNIFER		2.2 NAMÉ				
STREET ADDRESS	12096 NW 25TH ST		2.3 STREET ADDRESS				
CITY-ST-ZIP	CORAL SPRINGS FL 33065		2. 4 CITY-ST-ZIP				
TITLE		☐ DELETE	3 1 TITLE		☐ Change ☐ Addition		
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS		; [		
CITY-ST-ZIP		[] NE) ETE	3.4. CITY-ST-ZIP		☐ Change ☐ Addition		
TITLE		☐ DELETE	4.1 TITLE				
NAME			4. 2 NAME				
STREET ADDRESS			4 3 STREET ADDRESS				
CITY-ST-ZIP		☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		☐ Change ☐ Addition		
TITLE		- Deterie	5.2 NAME	•			
NAME STDEET ADDRESS							
STREET ADDRESS			5.3 STREET ADDRESS				
			5.3 STREET ADDRESS 5.4 CITY-ST-ZIP				
CITY-ST-ZIP TITLE	·	☐ DELETE			☐ Change ☐ Addition .		
TITLE	<u> </u>	☐ DELETE	5.4 CITY-ST-ZIP		☐ Change ☐ Addition .		
		☐ DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		☐ Change ☐ Addition		

CITY-ST-ZIP 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 an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

341.7964