

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000012824

Entity Name: ATAJJE, INC.

FILED
Apr 23, 2004
Secretary of State

Current Principal Place of Business:

14217 THIRD STREET
DADE CITY, FL 33523

New Principal Place of Business:

Current Mailing Address:

1302 W SLIGH AVE
SUITE A
TAMPA, FL 33604

New Mailing Address:

FEI Number: 59-3387314 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREENFELDER, GLENN
14217 THIRD STREET
DADE CITY, FL 33523

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: NORIEGA, ARTHUR IV
Address: 8637 CHADWICK DRIVE
City-St-Zip: TAMPA, FL

Title: D () Delete
Name: GREENFELDER, GAIL
Address: 36601 ST. JOE ROAD
City-St-Zip: DADE CITY, FL 33325

Title: TD () Delete
Name: JIMENEZ, JAMES A
Address: 1302 W. SLIGH AVENUE
City-St-Zip: TAMPA, FL 33604

Title: D () Delete
Name: ACEBO, ALBELARDO
Address: 6050 JET PORT INDUSTRIAL BLVD
City-St-Zip: TAMPA, FL 33634

Title: SD () Delete
Name: JACKSON, EDWARD
Address: 6050 JET PORT INDUSTRIAL BLVD
City-St-Zip: TAMPA, FL 33634

Title: PD () Delete
Name: GREENFELDER, GLENN
Address: 14217 THIRD ST
City-St-Zip: DADE CITY, FL 33523

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: NORIEGA, ARTHUR IV
Address: 8637 CHADWICK DRIVE
City-St-Zip: TAMPA, FL

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES A JIMENEZ

TREA

04/23/2004

Electronic Signature of Signing Officer or Director

_____ Date