

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000067220 (0)

1. Corporation Name
CPJ LIMITED, INC.

Principal Place of Business

801 SO. OCEAN DR.
1010
FT. PIERCE FL 34949
US

Mailing Address

801 SO. OCEAN DR.
1010
FT. PIERCE FL 34949
US

2. Principal Place of Business

21 5005 Tamoka Ct.

Suite, Apt. #, etc.

22 City & State

23 Ft. Pierce, FL

Zip Country

24 34951

25 USA

2a. Mailing Address

26 5005 Tamoka Ct.

Suite, Apt. #, etc.

27 City & State

28 Ft. Pierce, FL

Zip Country

29 34951

30 USA

9. Name and Address of Current Registered Agent

PAULETTE GALLO
801 SO. OCEAN DRIVE
#1010
FT. PIERCE FL 34949

81 Name

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

5005 Tamoka Ct.

83

84 City

Ft. Pierce

FL

85 Zip Code
34951

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME GALLO, PAULETTE

STREET ADDRESS 801 S. OCEAN DR., #1010

CITY-ST-ZIP FT. PIERCE FL

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5005 Tamoka Ct.

Ft. Pierce, FL 34951

900002250339--6

-07/29/97--01041--025

****165.00 ****165.00

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I do 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.

FILED

97 JUL 23 AM 8:59

SECRETARY OF STATE
TALLAHASSEE FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/30/1995

3a. Date of Last Report

05/01/1996

4. FEI Number

65-0606799

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

10. Name and Address of New Registered Agent

CR2E034 (4/97)

July 18, 1997

2-2

Annual Report Filings
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

Gentlemen/Ladies:

Please be advised that I phoned your office this date and spoke with the reinstatement division and was told you never received my 1997 Corporation Annual Report or my check which was sent to you the end of April.

I filed the report and changed my address to 5005 Tamoka Ct., but when speaking to your representative she said you had no record of this address.

I have enclosed for your perusal the mailing part of your packet and as you can see you did mail it to my new address which I did not change until I filed the report in April.

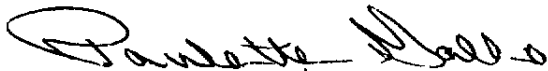
Your representative told me to send you this letter explaining the situation and to include a new check in the amount of \$165.00.

Please find enclosed again the corrected report along with my check #1335 in the amount of \$165.00 as per your representative's request and authorization.

I have also included a copy of my check register from April which shows the original check to you with the report in April.

I greatly appreciate your cooperation and attention to this matter.

Sincerely yours,



Paulette Gallo

5005 Tamoka Ct.
Ft. Pierce, FL 34951

(561) 468-6130 .

Enclosures