FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000092570 (7)

CJ-HART, INC.

Principal Place of Business 2723 NW 55TH ST. TAMARAC FL 33309 Mailing Address

FILED May 15 1997 8:00am Secretary of State



2723 NW 55TH TAMARAC FL		2/23 NW 551H 51. TAMARAC FL 33309-2538					
					3. Date Incorporated or Qualified 12/04/1995	3a. Date of La 05/01/19	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	L	Applied For
21		26			59-3347441		Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired		75 Additional e Required
City & Stali	е	City & State			Election Campaign Financing Trust Fund Contribution		.00 May Be ded to Fees
Zip	Country	Zıp	Countr	У	8. This corporation has liability for int	angible tax unc	der s. 199.032,
24	25	29	30			Yes No	
	9. Name and Address of Curr	ent Registered Agent		,	10. Name and Address of New Regi	stered Agent	
HAI	rtness, celina		8.	Name			
272	23 NW 55TH ST. MARAC FL 33309		8:	Street Add	ress (P.O. Box Number is Not Acceptable)	
1230	THE COURSE		6	9			
			8.			FL	Zip Code
11. Pursuant office or agent 1 a	to the provisions of Sections 607.0 registered agent, or both, in the Sta am familiar with, and accept the ob	502 and 607.1508, Florida Statuate of Florida. Such change was figations of, Section 607.0505, F	ites, the abo authorized l lorida Statut	ve-named corpora by the corpora es.	poration submits this statement for the pul tion's board of directors. I hereby accept	rpose of chang the appointmen	ing its registered nt as registered
SIGNATURE	Signature: typica or printed name of registered	agent and title if applicable (NO	TE: Registered A	gent signature requ	ired when reinstating)	DATE	
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	RS AND DIREC	TORS IN 12
THE	P	☐ DELETE	1.1 TITLE			☐ Cha	ange 🔲 Addition
NAME	HARTNESS, CELINA		1.2 NAM	:			
STREET ADDRESS	2723 NW 55TH ST.		1.3 STRE	ET ADDRESS			
CITY-ST-7IP	TAMARAC FL 33309		1.4 CITY	-ST-ZIP			
TITLE	ST	DELETE	2.1 TITLE			L. Cha	ange L. Addition
NAME	HARTNESS, JOHN		2.2 NAM				
STREET ADDRESS	2723 NW 55TH ST.		2.3 STRE	et address			
CI1 y - \$1 - ZIP	TAMARAC FL 33309		2. 4 CITY			, . [] A:	
TITLE		DELETE	31 TiTLE	1		☐ Cha	ange L. Addition
NAME			3.2 NAM				
STREET ADDRESS				ET ADDRESS			
CITY - S1 - ZIP		T December		-ST-ZIP		Ch	ange Addition
DILLE		DELETE	4.1 7176			L., UI	ange L. Moutton
NAME			4. 2 NAN				
STREET ADDRESS			1	ET ADORESS			
CITY - ST ZIP		DELETE	4.4 CITY		<u> </u>	☐ Ch	ange Addition
TITLE		בין שנינונ	5.1 TiTLE			L., C16	auto fiii vooilion
NAME:			5.2 NAM	,			
\$1REET ADDRESS				ET ADDRESS			
EITY-ST-7IP		T Drifts		-ST-ZIP		☐ Ch	ange Addition
1016		DELETE	6.1 1110	•		[] \/\li	ange LI Noviton
NAME			6.2 NAV				
STREET ADDRESS				ET ADDRESS			
City+S1-ZiP			6.4 CITY	-ST-ZIP	11 0 11 140 07/0V/) Fix 14- Cont.		that the

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.

SIGNATURE: X Celica Castrico Celina HARTNESS (Prosident) 4-72-97 954-485-9305

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daylore Proces