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May 12 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P96000000219 (1)

1. Corporation Name

BJT ENTERPRISES, INC.

Principal Place of Business

130 OLD HIGHWAY 98  
SUITE 4  
DESTIN FL 32541

Mailing Address

130 OLD HIGHWAY 98  
SUITE 4  
DESTIN FL 32541-4850

3. Date Incorporated or Qualified

01/02/1996

3a. Date of Last Report

NONE

2. Principal Place of Business

21 *SAME*  
Suite, Apt. #, etc.

2a. Mailing Address

26 *SAME*  
Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TANNER, JAMES H  
130 OLD HIGHWAY 98  
SUITE 4  
DESTIN FL 32541

81 Name

*SAME*

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

83

84 City

FL

85 Zip Code

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 of officer or director of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

| TITLE            | NAME                   | STREET ADDRESS            | CITY - ST - ZIP        | DELETE                   |
|------------------|------------------------|---------------------------|------------------------|--------------------------|
| <i>PRESIDENT</i> | <i>JAMES H. TANNER</i> | <i>130 OLD HIGHWAY 98</i> | <i>DESTIN FL 32541</i> | <input type="checkbox"/> |
| TITLE            | NAME                   | STREET ADDRESS            | CITY - ST - ZIP        | DELETE                   |
| TITLE            | NAME                   | STREET ADDRESS            | CITY - ST - ZIP        | DELETE                   |
| TITLE            | NAME                   | STREET ADDRESS            | CITY - ST - ZIP        | DELETE                   |
| TITLE            | NAME                   | STREET ADDRESS            | CITY - ST - ZIP        | DELETE                   |
| TITLE            | NAME                   | STREET ADDRESS            | CITY - ST - ZIP        | DELETE                   |
| TITLE            | NAME                   | STREET ADDRESS            | CITY - ST - ZIP        | DELETE                   |
| TITLE            | NAME                   | STREET ADDRESS            | CITY - ST - ZIP        | DELETE                   |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| 1.1 TITLE             | 1.2 NAME                 | 1.3 STREET ADDRESS        | 1.4 CITY - ST - ZIP              | Change                   | Addition                            |
|-----------------------|--------------------------|---------------------------|----------------------------------|--------------------------|-------------------------------------|
| <i>PRESIDENT</i>      | <i>JAMES H. TANNER</i>   | <i>1497 E NURSERY Rd</i>  | <i>SANTA ROSA BEACH FL 32459</i> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2.1 TITLE             | 2.2 NAME                 | 2.3 STREET ADDRESS        | 2.4 CITY - ST - ZIP              | Change                   | Addition                            |
| <i>VICE PRESIDENT</i> | <i>BARBARA A. TANNER</i> | <i>1497 E. NURSERY Rd</i> | <i>SANTA ROSA BEACH FL 32459</i> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 3.1 TITLE             | 3.2 NAME                 | 3.3 STREET ADDRESS        | 3.4 CITY - ST - ZIP              | Change                   | Addition                            |
|                       |                          |                           |                                  | <input type="checkbox"/> | <input type="checkbox"/>            |
| 4.1 TITLE             | 4.2 NAME                 | 4.3 STREET ADDRESS        | 4.4 CITY - ST - ZIP              | Change                   | Addition                            |
|                       |                          |                           |                                  | <input type="checkbox"/> | <input type="checkbox"/>            |
| 5.1 TITLE             | 5.2 NAME                 | 5.3 STREET ADDRESS        | 5.4 CITY - ST - ZIP              | Change                   | Addition                            |
|                       |                          |                           |                                  | <input type="checkbox"/> | <input type="checkbox"/>            |
| 6.1 TITLE             | 6.2 NAME                 | 6.3 STREET ADDRESS        | 6.4 CITY - ST - ZIP              | Change                   | Addition                            |
|                       |                          |                           |                                  | <input type="checkbox"/> | <input type="checkbox"/>            |

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:

*James H. Tanner*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*4/30/97* *904-837-6011*  
Date Daytime Phone #

0488133

CR2E034 (9/96)