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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P96000005272 (5) DOCUMENT #

LJG ENTERPRISES, INC.

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130	SEA	OATS	DF	AVE		

Mailing Address

139 SEA OATS DRIVE

FILED May 08 1998 8:00am Secretary of State



PANAMA CITY BEACH FL 32413 PANAMA CITY BEACH FL 32413 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/17/1996 2. Principal Place of Business 2a. Mailing Address Applied For 59-3421387 Not Applicable Suite, Apl. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing П Trust Fund Contribution Added to Fees Zip Country Country This corporation owes or has paid the current year Intangible 25 Personal Property Tax due June 30. Yes Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code

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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 tilk-ill applic	atile (NOTE I	Registered Agent signature	required when reinstating)	DATE					
12.	OFFICERS AND DIRECTOR		13.	ADDITIONS/CHANGES TO OFFIC		S IN 12				
TITLE	Р	DELETE	1.1 TITLE		Change	Addition				
NAME	GIBSON, LAWSONA T		1.2 NAME							
STREET ADDRESS	139 SEA OATS DRIVE		1.3 STREET ADDRESS							
CITY+ST-ZIP	PANAMA CITY BEACH FL 32413		1.4 CITY - ST - ZIP							
TITLE	VP .	DELETE	2.1 TITLE		Спапре	Addition				
NAME	GIBSON, JOHN W		22 NAME							
STREET ADDRESS	139 SEA OATS DRIVE		2 3 STREET ADDRESS							
CITY-ST-ZIP	PANAMA CITY BEACH FL 32413		2.4 CITY-ST-ZIP		<u>•</u>					
TITLE		DELETE	3.1 TITLE		☐ Change	Addition				
NAME			3.2 NAME							
STREET ADDRESS			3.3 STREET ADDRESS							
CITY-ST-ZIP			3.4. CITY-ST-ZIP							
TITLE		☐ DELETE	4.1 TITLE		Change	Addition				
HAME			4.2 NAME							
STREET ADDRESS			4.3 STREET ADDRESS							
CITY-ST-ZIP			4 4 CITY - ST - ZIP							
TITLE		DELETE	5.1 TITLE		Change	Addition				
NAME			5.2 NAME							
STREET ADDRESS			5.3 STREET ADDRESS							
CITY - ST - ZIP			5.4 CITY - ST- ZIP							
TILE		DELETE	61 TIFLE		Change	Addition				
NAME			62 NAME							
STREET ADDRESS			6.3 STREET ADDRESS			İ				
CITY. ST. 7IP			64 CITY - ST - 71P							

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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 changes or on an attachment with an address.

SIGNATURE: