

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000042945

Entity Name: LTJ ENTERPRISES INC.

FILED
Mar 16, 2005
Secretary of State

Current Principal Place of Business:

725 SW 16TH AVE
BAY 1
DELRAY BCH, FL 33444 US

New Principal Place of Business:

Current Mailing Address:

725 SW 16TH AVE
BAY 1
DELRAY BCH, FL 33444 US

New Mailing Address:

FEI Number: 65-0638412 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GENNACI, SALVATORE A
815 COVENTRY STREET
BOCA RATON, FL 334873106 US

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: VTS () Delete
Name: GENNACI, SALVATORE A
Address: 815 COVENTRY ST
City-St-Zip: BOCA RATON, FL 33487

Title: P () Delete
Name: GENNACI, JOSEPH R
Address: 725 SW 16TH AVE #1
City-St-Zip: DELRAY BEACH, FL 33444

Title: D () Delete
Name: JUBERT, BERTRAND
Address: 1510 MEDITERRANEAN RD
City-St-Zip: LAKE CLARKE SHORES, FL 33406

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: SALVATORE A. GENNACI

VTS

03/16/2005

Electronic Signature of Signing Officer or Director

_____ Date