2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000093546

Entity Name: F.L.J.S., INC.

FILED Apr 20, 2009 Secretary of State

Current Principal Place of Business:				New Princ	New Principal Place of Business:		
	1 TERRACE						
Current Mailing Address:				New Mailir	New Mailing Address:		
8701 SW 14 PEMBROKI	4 STREET E PINES, FL	33025		2000 SW 7 A/7-8 DAVIE, FL	1 TERRACE 33317		
FEI Number:	65-0725399	FEI Number Ap	plied For() F	El Number Not Appli	icable () Ce	ertificate of Status Desired ()	
Name and	Address of C	Current Registe	ered Agent:	Name and	Address of New	Registered Agent:	
ROBITAILLI 8701 SW 14 PEMBROKI	,	33025 US					
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:							
	Electron	nic Signature of	Registered Agent			Date	
Election Campaign Financing Trust Fund Contribution ().							
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	ROBITAILLE, LI 8701 SW 14 ST			Title: Name: Address: City-St-Zip:	() Cha	ange()Addition	
Title: Name: Address: City-St-Zip:	ROBITAILLE, LI 8701 SW 14 ST			Title: Name: Address: City-St-Zip:	PVST (X) Ch ROBITAILLE, LUCII 8701 SW 14 STRE PEMBROKE PINES	ET	
Title: Name: Address: City-St-Zip:	()) Delete		Title: Name: Address: City-St-Zip:	PVST () Ch ROBITAILLE, LUCII 8701 SW 14 STRE PEMBROKE PINES	ET	
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Title: Name: Address: City-St-Zip:	()) Delete		Title: Name: Address: City-St-Zip:	PVST () Chi ROBAITAILLE, LUC 8701 SW 14 STRE PEMBROKE PINES	ET	
Title: Name: Address: City-St-Zip:	()) Delete		Title: Name: Address: City-St-Zip:	PVST () Ch ROBITAILLE, LUCII 8701 SW 14 STRE PEMBROKE PINES	ET	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: LUCIE ROBITAILLE PVST 04/20/2009