


**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 03, 2003 8:00 am**  
**Secretary of State**

04-03-2003 90159 009 \*\*\*150.00

DOCUMENT # P96000094394

1. Entity Name CJA CONSULT, INC.



**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business 14649 AERUES WAY

3. Mailing Address SAME

Suite, Apt. #, etc.

City & State FORT MYERS, FL

City & State

Zip 33912 Country usa

Zip Country

4. FEI Number

Applied For  Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name CARL J. APPELBERG

Street Address (P.O. Box Number is Not Acceptable) 14649 AERIES WAY

City FORT MYERS **FL** Zip Code 33912

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE CARL J. APPELBERG

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

January 1, May 1 Fee is \$150.00  
After May 1 Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>PZT CARL J. APPELBERG 14649 AERIES WAY FORT MYERS, FL 33912</u>
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

12. 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 report or supplemental 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: Carl J. Appelberg 3/18/03 239-561-6972

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CARL J. APPELBERG

CR2E034B (12/02)