2002 UNIFORM BUSINESS REPORT (UBR)

Jan 14, 2002 8:00 am Secretary of State DOCUMENT # P96000094423 1. Entity Name HEJJ ENTERPRISES, INC. 01-14-2002 90051 007 ***158.75 Principal Place of Business Mailing Address 917 STATE ROAD 84 917 STATE ROAD 84 FORT LAUDERDALE FL 33315 FORT LAUDERDALE FL 33315 2. Principal Place of Business 3. Mailing Address 917 State Road 84 917 State Road 84 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Ft. Laud, FL City & State Ft. Laud, FL Applied For 4. FEI Number 65-0706027 Not Applicable 5. Certificate of Status Desired X . \$8.75 Additional Zip 3 3 3 1 5 ----Country Country Broward 33315 Broward 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JACQUES, HERBERT E JR Street Address (P.O. Box Number is Not Acceptable) 322 SOUTHWEST 20TH STREET FORT LAUDERDALE FL 33315 City Zip Code FL 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. 1/8/02 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE_NOW!!!_FEE_IS_\$150.00_ -10.-Election Campaign Financing \$5:00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. TITLE ☐ Delete TITLE Change Addition NAME JACQUES, HERBERT E JR NAME STREET ADDRESS 322 SOUTHWEST 20TH STREET STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE FL 33315 CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-71P CITY-ST-ZIP 13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Herbert E. Jacques Jr. - William Signature and typed or printed name of signing officer of director

1/7/2002

(954)764-0313

Date

Daytime Phone #

FILED