2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

Apr 16, 2004 8:00 am Secretary of State DOCUMENT # P96000095744 1. Entity Name 04-16-2004 90123 019 ***150.00 KJL ÉNTERPRISES, INC. Principal Place of Business Mailing Address 920 S.E. 13TH COURT 920 S.E. 13TH COURT DEERFIELD BEACH FL 33441 DEERFIELD BEACH FL 33441 2. Principal Place of Business 3. Mailing Address 508 S. Country Club Drive 508 S. Country Club Drive Suite, Apt. #, etc. MOORE CR2E034 (11/03) City & State City & State 4. FEI Number Applied For 65-0713807 Atlantis Atlantis Not Applicable Zip Zip 33462 Country Country \$8.75 Additional 5. Certificate of Status Desired us, Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LANSDALE, KIMBERLEE -Street Address (P.O. Box Number is Not Acceptable) 508 S, Country Gul 920 S.E. 13TH COURT DEERFIELD BEACH FL 33441 Zip Code 33462 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 PRESIDENT KIMBERLEE LANSDALE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE N D Delete TITLE Change ☐ Addition LANSDALE, KIMBERLEE NAME NAME 508 S. Country Club Drive Atlantis, FL 33462 920 S.E. 13TH COURT STREET ADDRESS STREET ADDRESS DEERFIELD BEACH FL 33441 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-21P CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ■ Addition NAME NAME STREET ADDRESS 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 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 Block 11 if

FILED

KIMBERLEE LANSUALE, PRES. 4/12/04 561-641-5826 SIGNATURE:

changed, or on an attachment with an address, with all other like empowered.