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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000096961

1. Corporation Name

HDJ ENTERPRISES, INC.

HUJ ENTERPRISES, INC.							
Principal Place of Business	Mailing Address					BiiiB	ים שו ושוו ושוום שוושי
425 S CHICKSAW TRL 1306 GOLFSIDE DRIV ORLANDO FL 32825 WINTER PARK FL 32 US					DO NOT WRITE IN THIS SPA	ACE	
					Date Incorporated or Qualifed 11/22/1996		
2. Principal Place of Business	2a. Mailing Address				4. FEI Number		Applied For
21	26				59-3412233		Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired		5 Additional e Required
City & State	City & State				6. Election Campaign Financing Trust Fund Contribution		00 May Be led to Fees
Zip Country	Zip 29	Ç0	untry		8. This corporation owes the current year Intangi Personal Property Tax.	ible Yes	□No
9. Name and Address of Curren			\Box		10. Name and Address of New Registered Age	nt	
SHAKES, DALE A			81	Name Street Addre	ess (P.O. Box Number is Not Acceptable)		
1306 GOLFSIDE DRIVE WINTER PARK FL 32792			83				
(0.500,000,000,000,000,000,000,000,000,00			84	City	<u> </u>		Zip Code

office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE										
Stgnature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
12.	OFFICERS AND DIRECTORS	13.								
TITLE	PD DELE	ETE 1.1 TITLE	☐ Change	Addition						
NAME	SHAKES, HARRY S	1.2 NAME								
STREET ADDRESS	1306 GOLFSIDE DRIVE	1,3 STREET ADDRESS		}						
CITY-ST-ZIP	WINTER PARK FL 32792	1.4 CITY-ST-ZIP								
TITLE	VO DELE	ETE 2.1 TITLE	Change	Addition						
NAME	SHAKES, DALE A	2.2 NAME		}						
STREET ADDRESS	1306 GOLFSIDE DRIVE	2.3 STREET ADDRESS		ļ						
CITY-ST-ZIP	WINTER PARK FL 32792	2.4 CITY-ST-ZIP		A 1 100						
TITLE	STD	ETE 3.1 TILE	Change D	Addition						
NAME	SHAKES, JOYCE I	3.2 NAME								
STREET ADDRESS	1306 GOLFSIDE DRIVE	3.3 STREET ADDRESS								
CITY-ST-ZIP	WINTER PARK FL 32792	3.4. CITY+ST-ZIP								
TITLE		ETE 4.1 TITLE	☐ Change	Addition						
NAME		4. 2 NAME		Ì						
STREET ADDRESS		4.3 STREET ADDRESS								
CITY-ST-ZIP		4.4 CITY-ST-ZIP								
TITLE	☐ DELI		☐ Change	Addition						
NAME		. 5.2 NAME								
STREET ADDRESS		5.3 STREET ADDRESS		ļ						
CITY-ST-ZIP		5.4 CITY-ST-ZIP								
TITLE	☐ DELI		Change	Addition						
NAME		6.2 NAME		ĺ						
STREET ADDRESS		6.3 STREET ADDRESS								
CITY-ST-ZIP	·	6.4 CITY-ST-ZIP	Control of the contro							

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRARRY SHARES SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR