

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
Feb 13, 2001 8:00 am  
Secretary of State

DOCUMENT # P96000096961

1. Entity Name

HDJ ENTERPRISES, INC.

Principal Place of Business

425 S CHICKSAW TRL  
ORLANDO FL 32825  
US

Mailing Address

1306 GOLFSIDE DRIVE  
WINTER PARK FL 32792

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3412233

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

SHAKES, DALE A  
1306 GOLFSIDE DRIVE  
WINTER PARK FL 32792

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME ☐ Delete

PD SHAKES, HARRY S  
1306 GOLFSIDE DRIVE  
WINTER PARK FL 32792

TITLE NAME ☐ Delete

VD SHAKES, DALE A  
1306 GOLFSIDE DRIVE  
WINTER PARK FL 32792

TITLE NAME ☐ Delete

STD SHAKES, JOYCE I  
1306 GOLFSIDE DRIVE  
WINTER PARK FL 32792

TITLE NAME ☐ Delete

TITLE NAME ☐ Delete

TITLE NAME ☐ Delete

TITLE NAME ☐ Delete

TITLE NAME ☐ Delete

TITLE NAME ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☐ Change ☐ Addition

200004527312-3  
-08/09/01--01061--01061  
\*\*\*\*150.00 \*\*\*\*150.00

TITLE NAME ☐ Change ☐ Addition

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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: *Harry S. Shakes*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/10/2001

Daytime Phone #