

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000014739

Entity Name: T.J.T.S. ENTERPRISES, INC.

FILED
Feb 12, 2006
Secretary of State

Current Principal Place of Business:

4419 VANCOUVER DR
JACKSONVILLE, FL 322070 US

New Principal Place of Business:

Current Mailing Address:

4419 VANCOUVER DR
JACKSONVILLE, FL 322070 US

New Mailing Address:

FEI Number: 59-3442794

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMERILAWYER CHARTERED
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HAWK, SHAROLYN M
Address: 6680 103RD STREET
City-St-Zip: JACKSONVILLE, FL 32210

Title: VP () Delete
Name: HAWK, DAVID
Address: 8406 CORAL CREEK LOOP
City-St-Zip: HUDSON, FL 34667

Title: S () Delete
Name: FISHER, LISA
Address: 10538 JONNY HARVEY RD.
City-St-Zip: SANDERSON, FL 32087

Title: T () Delete
Name: HAWK, AMANDA L
Address: 4730-2 SAN JOSE MANOR DR W
City-St-Zip: JACKSONVILLE, FL 32217

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: HAWK, DAVID
Address: P.O BOX 7042
City-St-Zip: HUDSON, FL 34674

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHAROLYN HAWK

PRES

02/12/2006

Electronic Signature of Signing Officer or Director

Date