FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

P97000018052 (5)

DOCUMENT # P9
1. Corporation Name
P.J.M. ENTERPRISES, INC

....

FILED Apr 01 1998 8:00am Secretary of State



Principal Place	of Business	Mailing Address				
1126 S.W. TIB		1126 S.W. TIBURON WAY				
PALM CITY FL 34890		PALM CITY FL 34990				DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						02/26/1997
2. Principal Place of Business 2a. Mailing Address						4. FEI Number Applied For
21		26				65-0727987 Not Applicable
Suite, Apt. i	#, etc	Suite, Apt. #, etc.	Suite, Apt. #, etc.			SR 75 Additional
22		27				5. Certificate of Status Desired Fee Required
City & State)	City & State				6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Country Zip Cou				8. This corporation owes or has paid the current year Intangible
24				Personal Property Tax due June 30. 🔲 Yes 🛂 No		
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent	
MARSHALL, KEN				81 Name		
1128 S.W. TIBURON WAY				82 Street Add		dress (P.O. Box Number is Not Acceptable)
- PALM CITY FL 34990			1			
			[83		
\				84	City	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered 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						
				gistered Agent signature require		
12.	OFFICERS AN			13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME	MADOUALS MON		1.2 NA			Change Addition
STREET ADDRESS	4400 CW TIDUDON WAY				ADDRESS	
	DALLS CITY EL 24000					
CITY+ST-ZIP TITLE			_	1.4 CITY - ST - ZIP		Change Addition
NAME	MADDIAL MANEY			2.2 NAME		
STREET ADDRESS	1126 S.W. TIBURON WAY	406 O M ZERUDOM WAY		2.3 STREET ADDRESS		
CITY-ST-ZIP	PALM CITY FL 34990	LI CITY EL 24000			- 1	
TITLE				2 4 CITY-ST-ZIP 31 TITLE		Change Addition
NAME	MANTIA, CAROL	7	3.2 NAME			
STREET ADDRESS	1126 S.W. TIBURON WAY				ADDRESS	
CITY-ST-ZIP	PALM CITY FL 34990			3.4. CITY - ST - ZIP		
TITLE			_	4.1 TITLE		Change Addition
NAME			4. 2 NA	ME		
STREET ADDRESS	.		4.3 STR	EET A	ADDRESS .	
CITY-ST-ZIP	-ZIP 4.4 CI			Y-ST	- ZIP	
TITLE	DELETE 5.1 TI		5.1 TITL	5.1 TITLE		☐ Change ☐ Addition
NAME	52N		5.2 NAN	5.2 NAME		4.S.
STREET ADDRESS	533		5.3 STR	5.3 STREET ADDRESS		
CITY-ST-ZIP	5.4 C		5.4 CITY	5.4 CITY-ST-ZIP		411
THLE			6.1 TITL	6.1 TITLE 6.2 NAME		00002476276 ^{hange} ^D Addition -04/02/9801014028
NAME			6.2 NAN			-04/02/9301014028
STREET ADDRESS	6.		6.3 STR	6.3 STREET ADDRESS		***150.00
CITY+ST-ZIP				4 CITY - ST - ZIP		
14. Thereby 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 suppliemental 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 13 if changed, or on an attachment with an address.						