

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000071826

Entity Name: SJ CONCEPTS, INC.

FILED
May 31, 2005
Secretary of State

Current Principal Place of Business:

8004 NW 154 STREET
162
MIAMI LAKES, FL 33016 US

Current Mailing Address:

8004 NW 154 STREET
162
HIALEAH, FL 33016 US

New Principal Place of Business:

6840 MIAMI LAKES DRIVE
MIAMI LAKES, FL 33014 US

New Mailing Address:

6840 MIAMI LAKES DRIVE
MIAMI LAKES, FL 33014 US

FEI Number: 65-0777619

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACKOWITZ, SHARON
8004 NW 154 ST
STE 162
MIAMI LAKES, FL 33016 US

Name and Address of New Registered Agent:

JACKOWITZ, SHARON
6840 MIAMI LAKES DRIVE
MIAMI LAKES, FL 33014 US

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: SHARON JACKOWITZ

05/31/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JACKOWITZ, SHARON
Address: 8004 NW 154 ST STE 162
City-St-Zip: MIAMI LAKES, FL 33016

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: JACKOWITZ, SHARON
Address: 6840 MIAMI LAKES DRIVE
City-St-Zip: MIAMI LAKES, FL 33014

Title: P () Change (X) Addition
Name: JACKOWITZ, ED
Address: 6840 MIAMI LAKES DRIVE
City-St-Zip: MIAMI LAKES, FL 33014

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ED JACKOWITZ

P

05/31/2005

Electronic Signature of Signing Officer or Director

Date