## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## Jan 07, 2005 08:00 AM DOCUMENT#-P97000108028 **Secretary of State** 1. Entity Name J & S ENTERPRISES OF LAKE WALES, INC. Principal Place of Business Mailing Address 2355 HWY 60 EAST 2355 HWY 60 EAST LAKE WALES, FL 33853 LAKE WALES, FL 33853 01052005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FE! Number Applied For 59-3488399 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MUSIC, SANDRA M DO NOT WRITE 2355 HWY 60 EAST LAKE WALES, FL 33898-5120 IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent Signature, typed or or nick harry of registered agent and title. I applicable (FIGTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME MUSIC, SANDRA M 2355 HWY 60 EAST STREET ADDRESS CTY-ST-7IP LAKE WALES, FL 33853 -U000000173146 BILE 01/07/05-80006-016 150.00 NAME HENRIKSON, JANET M STREET ADDRESS 2355 HWY 60 EAST CITY ST ZIP LAKE WALES, FL 33853 NAME STREET ADDRESS DO NOT WRITE CITY-ST ZIP IN THIS SPACE TITLE STREET ADDRESS CITY ST ZIP MARIE STREET ADDRESS CITY-ST ZIP TITLE NAME STREET ADDRESS

12. 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 10 or Block 11 if charged, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY ST 7IP

SIGNATURE AND TYPED APPRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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Dayline Phone #

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