Apr 06, 1999 8:00 am Secretary of State

04-06-1999 90089 010 ***150.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # POROCOLAROSA

1. Corporation C.G.J. E	NTERPRISES, INC.	040320							
Principal Place	e of Business	Mailing Address				T £BUI£BU (10 1310) 18ti	BAILL EBILL BAILL BAILL		1481 1611 1691
9976 LAKE SEMINOLE DRIVE. WEST 9976 LAKE SEMINOLE DRIVE. LARGO FL 33773 LARGO FL 33773									
ERIOO I E COI		D.1100 12 00.10				DO NO	T WRITE IN THIS	SPACE	
						 Date Incorporated or Q 05/26/1998 	ualifed		
2. Principal P	lace of Business	2a. Mailing Address	3			4. FEI Number		Ap	plied For
21		26				59-35/292	25	No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, et	C.			5. Certificate of Status De		\$8.75 A Fee Re	
City & Stat	е	City & State			-	6. Election Campaign Financing \$5.00 May Be Added to Fees			
Zip	Country Zip 29 3			Country		-	This corporation owes the current year Intangible Personal Property Tax. Yes		
24	9. Name and Address of Current		[50]	\top		10. Name and Address of			•
	J. 1141116			81	Name				
	GG, GLENN R					Address (P.O. Box Number is Not Acceptable)			
9976 LAKE SEMINOLE DRIVE, WEST				L			••		
LAH	GO FL 33773			83					
				84	City		FL	85 Zip C	
11. Pursuant office or ragent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat	and 607.1508, Florida of Florida. Such change ons of, Section 607.050	Statutes, the was author 05, Florida S	e above ized by Statutes	e-named of the corpo	corporation submits this statement tration's board of directors. I hereb	for the purpose of y accept the appoi	changing its ntment as reg	registered gistered
SIGNATURE									\
	Signature, typed or printed name of registered agent				nt signature re	equired when reinstating)	DATE	ID DIDECTO	DC 41 40
12.	OFFICERS ANI			13.		ADDITIONS/CHANGES	10 OFFICERS AN	Change	Addition
TITLE	PO DELETE		1	1.1 TITLE				□ oriange	
NAME	CLEGG, GLENN R			2 NAME					
STREET ADDRESS 9976 LAKE SEMINOLE DRIVE, WEST					TADDRESS				[
CITY-ST-ZIP	LARGO FL 33773			1.4 CITY-S	T-ZIP			[] Change	Addition
TITLE			1	2.1 TITLE			•	Change	
NAME			1	2.2 NAME					
STREET ADDRESS			2	2.3 STREE	TADDRESS				1
ÇITY-ST-ZIP				2. 4 CITY-5	ST-ZIP				
TITLE	ļ	☐ DELE	ETE :	3.1 TITLE				Change	☐ Addition
NAME			;	3.2 NAME					
"STREET ADDRESS				3.3 STREE	TADORESS	Let with the control of the way to be		- ,	
CITY-ST-ZIP				3.4. CITY-5	ST-ZIP				
TITLE		☐ DELE	TE 4	1.1 TITLE				Change	☐ Addition
NAME			4	4. 2 NAME					
STREET ADDRESS			4	1.3 STREE	T ADDRESS				
CITY-ST-ZIP				4.4 CITY-S	T-ZIP				
TITLE		☐ DELE	TE !	5.1 TITLE				` ☐ Change	☐ Addition

CITY-ST-ZIP 14. 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 annual report or supplemental 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 12 or Block 13 if charged, or on an attachment with an address, with all other like empowered.

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

Change

☐ Addition