

2005 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P99000022631

1. Entity Name
MICHAEL JAY ENTERPRISES, INC.



Principal Place of Business
2170 NURSERY RD.
CLEARWATER, FL 33764

Mailing Address
7127 PELICAN ISLAND DRIVE
TAMPA, FL 33634

FILED
Apr 06, 2005 08:00 AM
Secretary of State



03312005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-3563375

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

ANASTASIA, STEVEN J
7127 PELICAN ISLAND DR.
TAMPA, FL 33634

**DO NOT WRITE
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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTSD
ANASTASIA, STEVEN J
7127 PELICAN ISLAND DR.
TAMPA, FL 33634

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPD
VELKY, SCOTT M
1450 BYRAM DR.
CLEARWATER, FL 33755

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000289111
04/06/05-80035-023.150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

3/31/05 (878) 885 606