

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
**1995**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 APR 11 PM 8:35

DOCUMENT # **S07778** (1)

1. Corporation Name

**BLJ ENTERPRISES, INC.**

Principal Place of Business

**882 BELLEVUE ST NE  
PALM BAY FL 32907**

Mailing Address

**4711 BABCOCK ST NE  
PALM BAY FL 32905  
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified  
**10/18/1990**

3a. Date of Last Report  
**04/15/1994**

2. Principal Place of Business

**4711 BABCOCK ST. NE**

2a. Mailing Address

**882 BELLEVUE ST. NE**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
**PALM BAY, FL**

City & State  
**PALM BAY, FL.**

Zip  
**32905**

Country  
**USA**

Zip  
**32907**

Country  
**USA**

4. FEI Number  
**59-3030631**

Applied For  
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,  
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**ADRIAN, BRADFORD  
882 BELLEVUE ST NE  
PALM BAY FL 32907**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

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

Signature, typed or printed name of registered agent and title of application

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE  
**D**  
NAME  
**ADRIAN, BRADFORD**  
STREET ADDRESS  
**882 BELLEVUE ST NE**  
CITY, ST, ZIP  
**PALM BAY FL**

TITLE  
**D**  
NAME  
**ADRIAN, JEAN**  
STREET ADDRESS  
**882 BELLEVUE ST NE**  
CITY, ST, ZIP  
**PALM BAY FL**

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY, ST, ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY, ST, ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 changed, or on an attachment with an addendum.

SIGNATURE:

*Bradford A. Adrian*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/4/95

407-952-2397