

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S53997

**Entity Name:** C.J. FIRE PROTECTION INC.

**Current Principal Place of Business:**

10850 N.W. 138 STREET  
UNIT- 1  
HIALEAH GARDENS, FL 33018

**Current Mailing Address:**

10850 N.W. 138 STREET  
UNIT- 1  
HIALEAH GARDENS, FL 33018 US

**FEI Number:** 05-0607938

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

JOHNSON, CONNELL  
10850 N.W. 138 STREET  
UNIT- 1  
HIALEAH GARDENS, FL 33018 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title                    P  
Name                    JOHNSON, CONNELL  
Address                10850 N.W. 138 STREET  
                              UNIT- 1  
City-State-Zip:        HIALEAH GARDENS FL 33018

Title                    T  
Name                    JOHNSON, PEGGY  
Address                10850 N.W. 138 STREET  
                              UNIT- 1  
City-State-Zip:        HIALEAH GARDENS FL 33018

I hereby 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 all other like empowered.

**SIGNATURE:** CONNELL JOHNSON

**PRESIDENT**

**04/30/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date