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

**PROFIT** CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

J88041

DOCUMENT # J880 1. Corporation Name MJB ASSOCIATES, INC.	41 (5)			WAL BARIL BARIL BARIL BARIL BARIL BARIL BARIL
Principal Place of Business	Mailing Address			
820 TIVOLI CIRCLE SUITE 208 DEERFIELD BEACH FL 33441	265 S. FEDERAL HW SUITE 263 DEERFIELD BCH FL			
	U\$	33441	3. Date Incorporated or Qualified 08/14/1987	3a. Date of Last Report 07/05/1995
Principal Place of Business	2a. Mailing Address		4. FE! Number	Applied For
Suite, Apt. #, etc.	26   Suite, Apt. #, etc.	- A	59-2831919	Not Applicable
2	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Ony & State	Orty & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Zip	Country	8. This corporation has liability for in	ntangible tax under s. 199.032,
9. Name and Address of Cu	29	30	Florida Statutes Yes	
	Tront registered Agent	81 Name	10. Name and Address of New Re	egistered Agent
BERMAN, MARC				
820 TIVOLI CIRCLE		82 Street Add	dress (P.O. Box Number is Not Acceptable	9)
#208		83		
DEERFIELD BEACH FL 33441		84 City		<b>85</b> Zip Code
11. Pursuant to the provisions of Sections 607.0 or registered agent, or both, in the State of familiar with, and accept the objections of	0502 and 607.1508, Florida State Florida, Such change was author	1 1	pration submits this statement for the purp and of directors. I hereby accept the appoi	FL os zip code  rose of changing its registered office intment as registered agent. I am
S!GNATURE Signature typed or printed name of registered.	agosit and title if applicable.	ites, the above-named corporation's body ized by the corporation's body as.	et wher rainstang	ose of changing its registered office intment as registered agent. I am
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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

4/15/96 954-426-4365
Date 954-426-4365