FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

FILED
Apr 01 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

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

DOCUMENT # K52955

1. Corporation Name
M.J.L. CORPORATION

Principal Place of Business / Mailing Address
13764 MONACO WAY
P.B. GARDENS, FL. 33410

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12-22-88

2. Principal Place of Business — 21
Suite, Apt. #, etc. — 22
City & State — 23
Zip — 24 / Country — 25

2a. Mailing Address — 26
Suite, Apt. #, etc. — 27
City & State — 28
Zip — 29 / Country — 30

4. FEI Number: 65-0094960 ☐ 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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☑ Yes ☐ No

9. Name and Address of Current Registered Agent
WALTER I. LEITER
13764 MONACO WAY
P.B. GARDENS, FL. 33410

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: Walter I. Leiter — 3-15-98
Signature of new registered agent, if applicable (NOTE: Registered Agent signature required when reinstating) — DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRESIDENT	☐ DELETE	11 TITLE	☐ Change ☐ Addition
NAME	WALTER I. LEITER		12 NAME	
STREET ADDRESS	13764 MONACO WAY		13 STREET ADDRESS	
CITY-ST-ZIP	PALM BEACH GARDENS, FL. 33410		14 CITY-ST-ZIP	
TITLE	SECRETARY + TREAS.	☐ DELETE	21 TITLE	☐ Change ☐ Addition
NAME	MARILYN LEITER		22 NAME	
STREET ADDRESS	13764 MONACO WAY		23 STREET ADDRESS	
CITY-ST-ZIP	PALM BEACH GARDENS, FL. 33410		24 CITY-ST-ZIP	
TITLE	VICE PRES.	☐ DELETE	31 TITLE	☐ Change ☐ Addition
NAME	MICHAEL LEITER		32 NAME	
STREET ADDRESS	142 LANGELIER		33 STREET ADDRESS	
CITY-ST-ZIP	MARLBOROUGH, MASS., 01752		34 CITY-ST-ZIP	
TITLE	VICE PRES.	☐ DELETE	41 TITLE	☐ Change ☐ Addition
NAME	LIZABETH QUINN		42 NAME	
STREET ADDRESS	14 OXFORD ROAD		43 STREET ADDRESS	
CITY-ST-ZIP	LARCHMONT, N.Y., 10538		44 CITY-ST-ZIP	
TITLE		☐ DELETE	51 TITLE	☑ Change ☐ Addition
NAME			52 NAME	
STREET ADDRESS			53 STREET ADDRESS	
CITY-ST-ZIP			54 CITY-ST-ZIP	
TITLE	VICE PRES.	☐ DELETE	61 TITLE	☐ Change ☐ Addition
NAME	JOSHUA REED LEITER		62 NAME	
STREET ADDRESS	P.O. BOX 213 (N/A)		63 STREET ADDRESS	
CITY-ST-ZIP	WENTWORTH, N.H. 03282		64 CITY-ST-ZIP	

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***150.00

14. I hereby certify that the information supplied with this filing does not qualify for the exempt on 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 changed, or on an attachment with an address.

SIGNATURE: Walter I. Leiter — WALTER I. LEITER — 3-15-98 — 561-775 9671
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (10/97)