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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

P97000024556 (7)

M J M CONTRACTORS, INC.

FILED
May 15 1998 8:00am
Secretary of State

Principal Place	e of Business	Mailing Address		}	AN BIRAT ALIBE AND ANY 1881
12991 114TH AVE N		12991 114TH AVE N			
LARGO FL 33774		LARGO FL 33774		DO NOT WOITE IN THIS	
				DO NOT WRITE IN THIS 3. Date Incorporated or Qualified	SPACE.
				03/13/1997	
2. Principal P	lace of Business	2a, Mailing Address		4, FEI Number	Applied For
21 1299	lace of Business	26		59-344 4719	Not Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6, Election Campaign Financing	\$5.00 May Be
Zip	Country	28	Country	Trust Fund Contribution	Added to Fees
24 ろうフ	74 25 PINELLAS		30	 This corporation owes or has paid the corporate Property Tax due June 30. 	urrent year Intangible No
24 - 250	9 Name and Address of Current		30]	10. Name and Address of New Registered	
Mir	CHAUD, MICHAEL J		81 Name		
40004 444TH AVE N			62 Street Add	ress (P.O. Box Number is Not Acceptable)	<u> </u>
	RGO FL 33774			reas (F.O. Box (Municer is 190) Acceptation	
			63		
			84 City		85 Zip Code
					_
11. Pursuant to office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State i	2 and 607 1508, Florida Statule of Florida. Such change was a	es, the above-named corp uthorized by the corpora	poration submits this statement for the purpose tion's board of directors. I hereby accept the ap	of changing its registered boointment as registered
agent. I a	m tamiliar with, and accept the obliga	strons of, Section 607.0505, Flo	rida Statutes	, , ,	
SIGNATURE	Signature typod or printed name of registered age:	e or deth, described the ANOLE	Registered Agent signature regul	ired when reinslating) DATE	· · · · · · · · · · · · · · · · · · ·
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	MICHAUD, MICHAEL J		1.2 NAME	•	
STREET ADDRESS	12991 114TH AVE N		1.3 STREET ADDRESS		
CITY-ST-ZIP	LARGO FL 33774		1.4 CITY - ST - ZIP		
TITLE		L. D€LETE	2.1 1ITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP		Distress	2.4 CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	
TITLE		L DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREFT ADDRESS		i
CITY-ST-ZIP TITLE		☐ DELETE	3.4 CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME		L PLICIE	4. 2 NAME		Cuange C Addition
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CiTY - ST - ZIP 5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5 4 City-St-ZiP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			63 STREET ADDRESS		ĺ

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental 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 an attachment with an address.