

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000010800

**Entity Name:** MURDOCK ENTERPRISES, INC.

**Current Principal Place of Business:**

243 BRAZILIAN AVE.  
PALM BEACH, FL 33480

**Current Mailing Address:**

C/O MORRIS ENGELBERG ESQ  
1920 EAST HALLANDALE BEACH BOULEVARD SUITE 806  
HALLANDALE BEACH, FL 33009 US

**FEI Number:** 65-0981124

**Certificate of Status Desired:** No

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

ENGELBERG, MORRIS ESQ  
C/O MORRIS ENGELBERG ESQ  
1920 EAST HALLANDALE BEACH BOULEVARD SUITE 806  
HALLANDALE BEACH, FL 33009 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            PRESIDENT, TREASURER, DIRECTOR  
Name            MURDOCK, NANCY  
Address        243 BRAZILIAN AVENUE  
City-State-Zip: PALM BEACH FL 33480

Title            VP  
Name            WEAVER, DONNA  
Address        18 RIVER DRIVE  
City-State-Zip: TITUSVILLE NJ 08560

Title            SECRETARY  
Name            WEAVER, DEBRA  
Address        7181 EMILY LANE  
City-State-Zip: GOLETA CA 93117

*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:** NANCY MURDOCK

**PRESIDENT**

**02/14/2024**

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

\_\_\_\_\_  
Date