

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000023839

Entity Name: MJ'S QUALITY MOVING SERVICE "LLC"**Current Principal Place of Business:**7927 TAM O'SHANTAR BLVD
NORTH LAUDERDALE, FL 33068**Current Mailing Address:**7927 TAM O SHANTAR BLVD
NORTH LAUDERDALE, FL 33068**FEI Number: 81-5223145****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**JOSEPH, MUSTAPHA
7927 TAM O SHANTAR BLVD
NORTH LAUDERDALE, FL 33068 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**Authorized Person(s) Detail :**

Title	CEO
Name	JOSEPH, MUSTAPHA
Address	7927 TAM O SHANTAR BLVD
City-State-Zip:	NORTH LAUDERDALE FL 33068

Title	PRES
Name	JOSEPH, MUSTAPHA
Address	7927 TAM O SHANTAR BLVD
City-State-Zip:	NORTH LAUDERDALE FL 33068

Title	VP
Name	JOSEPH, KALISE
Address	7927 TAM O SHANTAR BLVD
City-State-Zip:	NORTH LAUDERDALE FL 33068

Title	TREA
Name	JOSEPH, PAULINE
Address	7927 TAM O SHANTAR BLVD
City-State-Zip:	NORTH LAUDERDALE FL 33068

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MUSTAPHA JOSEPH**CEO****04/03/2018**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date