THE HUTT, PILING FEE AFTER . AT 151 IS \$550.00

PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Katherine Harris ANNUAL REPORT Secretary of State FILED 1999 DIVISION OF CORPORATIONS **DOCUMENT # 432357** 99 MAY -3 AH 8: 00 M.J.M. INDUSTRIES INC Principal Place of Business Mailing Address 195 WINDWARD LANE 195 WINDWARD LANE ORMOND BCH FL 32176 **DRMOND BCH FL 32176** DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualifed 08/07/1973 4. FEI Number 2. Principal Place of Business 2a. Malling Address Applied For 21 26 59-1483555 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Efection Campaign Financing \Box 23 28 Trust Fund Contribution Added to Fees Zip Country Žĺp Country 8. This corporation owes the current year Intanable N_{No} 24 25 30 29 Personal Property Tax 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent STOUT, LARRY R. Street Address (P.O. Box Number is Not Acceptable) 444 SEABREEZE BOULEVARD **DAYTONA BEACH FL 32118** City 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 familier with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1.1 TITLE Change ☐ Addition TITLE PD MEYER, JEROME B. NAME 12 NAME 195 WINDWARD LANE 1.3 STREET ADDRESS STREET ADORESS ORMOND BCH FL CITY-ST-ZIP 1.4 CITY-ST-ZIP PELETE STD Change ☐ Addition TTLE MEYER: FRANCESKA R. 105 WINDWARD TANE 2 3 STREET ADDRESS STREET ADDRESS ORMOND DCH FL 2.4 CITY-ST-ZIP CITY-8T-ZIP DELETE Change Addition TITLE 3.1 TID.E MEYER, MICHAEL J. 3 2 NAME **15 MARJORIE TRAIL** 33 STREET ADDRESS ORMOND BCH FL 34. CITY-ST-2IP Change DELETE ☐ Addition 4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP DELETE Addition 5.1 TITLE ☐ Change 5 2 NAME 53 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE 6 1 TITLE Addition TITLE 心证 STREET ADDRESS

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 supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: