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PROFIT CORPORATION ANNUAL REPORT



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

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Corporation	MENT # 84816 ERIC JOHNSON, INC.	66 (5)		I IARKAN IANA ANAN IRRA NAMA	A BIJI BIBII BIBII AIBH BIB	
Principal Place of Business M 3007 NORTH DECATUR ROAD DECATUR GA 30033		Mailing Address 3007 NORTH DECAT	UR ROAD		9 (M) ((M) ((M) ((M) (M) ((M) (M) ((M) ((M)	
				3. Date Incorporated or Qualified 02/04/1981	3a. Date of Last R 05/01/19	
Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number		Applied For
l		26		58-0918468		Not Applicable
Suite, Apt. #	t, etc.	Suite, Apt. #, etc		5. Certificate of Status Desired	1 1	Additional Required
City & State		City & State		6. Election Campaign Financing		0 May Be
,		28		Trust Fund Contribution		d to Fees
Zφ	Country	Zip	Country	8. This corporation has liability for it		199.032,
	9. Name and Address of Curre	29	[30]	Florida Statutes Yes 10. Name and Address of New R		····
	g, Hame and Address of Curre	ent Registered Agent	81 Name	10. Name and Address of New N	adistated whalit	
	n, stan J.S. Highway 19 n., ste 420	•	82 Street Ad	dress (P.Ö. Box Number is Not Acceptab	le)	
	ARBOR FL 34684	,	83			
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. Pursuant t or registeri familiar wit	o the provisions of Sections 607.050 ed agent, or both, in the State of Flo n, and accept the obligations of, Se	02 and 607.1508, Florida Statu orda: Such change was authori ction 607.0505, Florida Statute	tes, the above-named corporation's bos.	oration submits this statement for the pur pard of directors. I hereby accept the appo	roose of changing its	p Code registered offic Lagent. Lam
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If do hereby certify that the information supplied with this filing is volunterily furnished and does not quality for the exemption stated in Section 119.07(3)(k), Florida Statutes. Fluriher certify that the information indicated on this annual report or supplied annual report is true and accurate and that my signature shall have the same legal effect as if made under early that I am an officer or director of the corporation or the economic 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 or aligned, or on an attachment with an address.

SIGNATURE:

ENATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

27 96 404 292-0125