2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2008 08:00 A
Secretary of State

DOCUMENT # F02000002965

1. Entity Name
MAJESTIC BUILDERS CORP.

Principal Place of Business	Mailing Address
5530 WISCONSIN AVENUE STE. 900 CHEVY CHASE, MD 20815	5530 WISCONSIN AVENUE STE. 900 CHEVY CHASE, MD 20815

DO NOT WRITE IN THIS SPACE

01072008 No Chg-P CR2E034 (11/05)

4. FEI Number
52-0805325

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

000000868240
04/09/08-80001-006 150.00

10.	OFFICERS AND DIRECTORS
TITLE	DPT
NAME	ZUPNIK, STANLEY R
STREET ADDRESS	5530 WISCONSIN AVENUE STE. 900
CITY-ST-ZIP	CHEVY CHASE, MD 20815
TITLE	DVP
NAME	ZUPNIK, KEVIN
STREET ADDRESS	5530 WISCONSIN AVENUE STE. 900
CITY-ST-ZIP	CHEVY CHASE, MD 20815
TITLE	DS
NAME	BORREDA, BELLA
STREET ADDRESS	5530 WISCONSIN AVENUE STE. 900
CITY-ST-ZIP	CHEVY CHASE, MD 20815
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 3/19/08 3.951.0900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #