2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04351

Entity Name: MJM'S, INC.

FILED Apr 13, 2009 Secretary of State

| Current Principal Place of Business: | | | | New Principal Place of Business: | | |
|---|--|--------------------------------|---------------------|--|--------------------------------------|--|
| P.O. BOX 294 LAKE WALES, FL 338590294 | | | | 237 E STUART AVENUE LAKE WALES, FL 338590294 | | |
| Current Mailing Address: | | | | New Mailing Address: | | |
| P.O. BOX LAKE WAI | 294 LES, FL 33859 | 0294 | | | | |
| FEI Number | : 59-2045928 | FEI Number Applied For() | FEI Number | Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | | Name and Address of New Registered Agent: | | |
| RRHODENIZER, MARY JO 1220 THORNBURG RD BABSON PARK, FL 33827 US | | | | HODENIZER, MARY JO 20 THORNBURG RD BSON PARK, FL 338 | | |
| | named entity see of Florida. | submits this statement for the | purpose of ch | anging its registered c | office or registered agent, or both, | |
| SIGNATURE: MARY JO RHODENIZER | | | | | 04/13/2009 | |
| | Electron | ic Signature of Registered A્ | gent | | Date | |
| Election Car | mpaign Financing | g Trust Fund Contribution (). | | | | |
| OFFICERS AND DIRECTORS: | | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | |
| Title: Name: Address: | STD () ROGERS, ELE 1126 S SCENIO | | Title Nar Add | • |) Change () Addition | |

City-St-Zip:

1126 S SCENIC HWY City-St-Zip:

LAKE WALES, FL 00000,

() Delete RHODENIZER, MARY JO Name: Address:

City-St-Zip:

1220 THORNBURG RD BABSON PARK, FL 33827 Title: () Change () Addition

Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: MARY JO RHODENIZER **PRES** 04/13/2009