FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # Corporation Name

23

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Ζip

Country

9. Name and Address of Current Registered Agent

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STOTZER, THEODORE R 200 SOUTH PARK ROAD - #200 HOLLYWOOD FL 33021

F92000000192 (6)

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Zip

MJSI WEST LAKE, INC.

Mailing Address Principal Place of Business 200 SOUTH PARK ROAD. #200 200 SOUTH PARK ROAD. #200 HOLLYWOOD FL 33021 HOLLYWOOD FL 33021 3. Date Incorporated or Qualified 11/10/1992 4, FEI Number 2a. Mailing Address 2. Principal Place of Business 65-0372829 26 21 Suite, Apt. #, etc. 5. Certificate of Status Desired Suite, Apt. #, etc. 27 22 City & State City & State

	l l	0. 00. m.	-12	F	ee Required				
		Election Campaign Financia Trust Fund Contribution	^{rg} []		.00 May Be ided to Fees				
ountry	,	This corporation has liability Florida Statutes	for intangible t Yes K No	ax unde	ers 199.032,				
Π'''	1	IO. Name and Address of N	ew Registered	Agent					
81	Name								
82	Street Address	Street Address (P.O. Box Number is Not Acceptable)							
83									
84	City			85	Zip Code				

3a. Date of Last Report

04/26/1995

Applied For

\$8.75 Additional

Not Applicable

11. Rursuant 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

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familiar with	, and accept the obligations of, Section 607.0505, Florida	a Statutes.			
SIGNATURE	Ignature, typed or printed name of registered agent and title if applicable.	(NOTE: Reg	istered Agent signature requ	equired when reinsteting) DATE	
12,	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	2
TITLE	PSTD DE	LETE	1. 1 TITLE	☐ Change ☐ Ad	ddition
NAME	SWERDLOW, MICHAEL J	Į.	1.2 NAME		
SIREET ADDRESS	200 SOUTH PARK ROAD - #200		1.3 STREET ADDRESS		
CITY-ST-ZIP	HOLLYWOOD FL 33021		1.4 CITY-ST-ZIP		
TITLE	DE	ELETE	2 1 TITLE	Change Ad	ddition
NAME			2.2 NAME		
STREET ADDRESS			2 3 STREET ADDRESS		
CITY - S1 - ZIP			2.4 CITY - ST - ZIP		4.000
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NAME			3.2 NAME		
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CITY-ST-ZIP			3.4 CITY - ST - ZIP		
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NAME			4.2 NAME	600001800936 -04/30/9601043009	
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP	***208,75	
TITLE		ELETE	5 1 TITLE	Change A	Addition
NAME			5 2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP	Pag a	A ad ad bit a se
TOLE		DELETE	6.1 TITLE	Change A	Addition
NAME			62 NAME	1 20-91	0
STREET ADDRESS			6.3 STREET ADDRESS	1 2/p 1	-
CITY-ST-7IP	,	,	6.4 CITY - ST - ZIP	, <u>J</u>	

14. I do hereby certify that the information supplied with the filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if the finged, or an analytic or manual report and diverse.

SIGNATURE:

TED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE AND TYPED OR

3/27/96

(954) 981-1000

Daytime Phone #