

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
May 01 1997 8:00am
Secretary of State

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| PROFIT CORPORATION ANNUAL REPORT 1997 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
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DOCUMENT # K55087 (6)
1. Corporation Name
MJK INCORPORATED



Principal Place of Business
2285 NE DIXIE HWY
JENSEN BEACH FL 34957
US

Mailing Address
2430 NW LAKERIDGE DR
PALM CITY FL 34990-4865
US

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|--------------------------------|--|------------------------|--|--|--|---|--|
| 2. Principal Place of Business | | 2a. Mailing Address | | 3. Date Incorporated or Qualified 12/29/1988 | | 3a. Date of Last Report 03/19/1996 | |
| 21 Suite, Apt. #, etc. | | 26 Suite, Apt. #, etc. | | 4. FEI Number 65-0093893 | | Applied For Not Applicable | |
| 22 City & State | | 27 1901 NW 2ND AVE | | 5. Certificate of Status Desired <input type="checkbox"/> | | \$8.75 Additional Fee Required | |
| 23 Zip | | 28 DELRAY BCH FL 33444 | | 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | | \$5.00 May Be Added to Fees | |
| 24 Country | | 29 33444 | | 30 Palm Beach | | 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No | |

| | | | | | | | |
|---|--|--|--|---|--|--|--|
| 9. Name and Address of Current Registered Agent | | | | 10. Name and Address of New Registered Agent | | | |
| JOHNSTON, RICHARD 2430 NW LAKERIDGE DR PALM CITY FL 34990 | | | | 81 Name C WAYNE STEWART 82 Street Address (P.O. Box Number is Not Acceptable) 1901 N.W. 2ND Ave 83 1 84 City DELRAY BCH, FL 85 Zip Code 33444 | | | |

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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *C Wayne Stewart* CEO DATE 4-20-97

| | | | | | | | |
|----------------------------|----------------------|-------------|-------------------|---|-----------------|-----------------|-----------------------|
| 12. OFFICERS AND DIRECTORS | | | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | | |
| TITLE | CPT | NAME | JOHNSTON, RICHARD | 1.1 TITLE | CEO | 1.2 NAME | C WAYNE STEWART |
| STREET ADDRESS | 2430 NW LAKERIDGE DR | CITY-ST-ZIP | PALM CITY FL | 1.3 STREET ADDRESS | 1901 NW 2ND Ave | 1.4 CITY-ST-ZIP | DeLray Bch, Fla 33444 |
| TITLE | S | NAME | JOHNSTON, VERA | 2.1 TITLE | | 2.2 NAME | |
| STREET ADDRESS | 2430 NW LAKERIDGE DR | CITY-ST-ZIP | PALM CITY FL | 2.3 STREET ADDRESS | | 2.4 CITY-ST-ZIP | |
| TITLE | | NAME | | 3.1 TITLE | | 3.2 NAME | |
| STREET ADDRESS | | CITY-ST-ZIP | | 3.3 STREET ADDRESS | | 3.4 CITY-ST-ZIP | |
| TITLE | | NAME | | 4.1 TITLE | | 4.2 NAME | |
| STREET ADDRESS | | CITY-ST-ZIP | | 4.3 STREET ADDRESS | | 4.4 CITY-ST-ZIP | |
| TITLE | | NAME | | 5.1 TITLE | | 5.2 NAME | |
| STREET ADDRESS | | CITY-ST-ZIP | | 5.3 STREET ADDRESS | | 5.4 CITY-ST-ZIP | |
| TITLE | | NAME | | 6.1 TITLE | | 6.2 NAME | |
| STREET ADDRESS | | CITY-ST-ZIP | | 6.3 STREET ADDRESS | | 6.4 CITY-ST-ZIP | |

14. I do hereby 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *C Wayne Stewart* DATE: 4-20-97

CR2E034 (9/96)