

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 MAR 21 PM 3:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K88110

(7)

1. Corporation Name
MAJEAN, INC.

Principal Place of Business
**1904 HARRISON ST.
HOLLYWOOD FL 33020**

Mailing Address
**1904 HARRISON ST.
HOLLYWOOD FL 33020**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **05/15/1989** 3a. Date of Last Report **01/21/1994**

4. FEI Number **65-0117959** Applied For ☐ Not Applicable ☐

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

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

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business 2a. Mailing Address
21 **1735 N. Federal Hwy** 26 **1735 N. Federal Hwy**
Suite, Apt. #, etc. Suite, Apt. #, etc.

22 City & State 27 City & State
23 **Hollywood, Florida** 28 **Hollywood, Florida**

24 Zip 25 Country 29 Zip 30 Country
24 **33020** 25 **Broward** 29 **33020** 30 **Broward**

9. Name and Address of Current Registered Agent
**DUBUC, JEAN
1904 HARRISON ST.
HOLLYWOOD FL 33020**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83 **1735 N Federal Hwy**
84 City **Hollywood** FL 85 Zip Code **33020**

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 *Jeannette Dubuc*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS
TITLE **DP**
NAME **DUBUC, JEAN**
STREET ADDRESS **1904 HARRISON ST.**
CITY-ST-ZIP **HOLLYWOOD FL**
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
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NAME
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CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS **1735 N. Federal Hwy**
1.4 CITY-ST-ZIP **Hollywood, FL 33020**
2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this 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 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Jeannette Dubuc*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #