

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

CORPORATION  
ANNUAL REPORT  
1995



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

**APPROVED  
AND  
FILED**

95 MAY -1 PM 1:43

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **L00425** (3)

1. Corporation Name  
**J.M.J. & P. INCORPORATED**

Principal Place of Business: **201 S ORANGE AVE STE 105 ORLANDO FL 32801 US**  
Mailing Address: **201 S. ORANGE AVE. SUITE 105 ORLANDO FL 32801 US**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	3a. Date of Last Report
21. State, Apt #, etc.	26. State, Apt #, etc.	07/07/1989	05/01/1994
22. City & State	27. City & State	4. FEI Number	Applied For
23. City	28. City	59-2978767	Not Applicable
24. Zip	29. Zip	5. Certificate of Status Desired	\$8.75 Additional Fee Required
25. City	29. City	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
26. City	29. City	7. This corporation has liability for intangible tax under Florida Statutes	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

**HOLLOWAY, RICK  
201 S. ORANGE AVE.  
SUITE 105  
ORLANDO FL 32801**

10. Name and Address of Now Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
84. City	<b>FL</b>

11. Pursuant to the provisions of Sections 607.01(2) and 607.17(4), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, in both or the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept this appointment as registered agent. I am familiar with and accept the obligations of such being a Florida Statutes.

SEPARATE FILE: *(Small text regarding separate filing instructions)*

12. OFFICERS AND DIRECTORS	13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS												
<table border="1"> <tr> <td>NAME</td> <td><b>P</b></td> <td><b>HOLLOWAY, RICK</b></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td><b>615 TOWNE SQUARE WAY, SUITE 1116</b></td> <td></td> </tr> <tr> <td>CITY</td> <td></td> <td><b>ORLANDO FL</b></td> <td></td> </tr> </table>	NAME	<b>P</b>	<b>HOLLOWAY, RICK</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS		<b>615 TOWNE SQUARE WAY, SUITE 1116</b>		CITY		<b>ORLANDO FL</b>		
NAME	<b>P</b>	<b>HOLLOWAY, RICK</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition										
STREET ADDRESS		<b>615 TOWNE SQUARE WAY, SUITE 1116</b>											
CITY		<b>ORLANDO FL</b>											
<table border="1"> <tr> <td>NAME</td> <td><b>D</b></td> <td><b>HOLLOWAY, DIANE</b></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td><b>615 TOWNE SQUARE WAY, SUITE 1116</b></td> <td></td> </tr> <tr> <td>CITY</td> <td></td> <td><b>ORLANDO FL</b></td> <td></td> </tr> </table>	NAME	<b>D</b>	<b>HOLLOWAY, DIANE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS		<b>615 TOWNE SQUARE WAY, SUITE 1116</b>		CITY		<b>ORLANDO FL</b>		
NAME	<b>D</b>	<b>HOLLOWAY, DIANE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition										
STREET ADDRESS		<b>615 TOWNE SQUARE WAY, SUITE 1116</b>											
CITY		<b>ORLANDO FL</b>											
<table border="1"> <tr> <td>NAME</td> <td><b>D</b></td> <td><b>EDER, LUCIA</b></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td><b>1197 IRWIN CT.</b></td> <td></td> </tr> <tr> <td>CITY</td> <td></td> <td><b>WINTER SPRINGS FL</b></td> <td></td> </tr> </table>	NAME	<b>D</b>	<b>EDER, LUCIA</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS		<b>1197 IRWIN CT.</b>		CITY		<b>WINTER SPRINGS FL</b>		
NAME	<b>D</b>	<b>EDER, LUCIA</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition										
STREET ADDRESS		<b>1197 IRWIN CT.</b>											
CITY		<b>WINTER SPRINGS FL</b>											

14. I hereby certify that the information furnished with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 607.01(2)(g), Florida Statutes. I further certify that the information made available in this annual report or supplemental annual report is true and correct and that the corporation shall have the same legal effect as if made under oath. That the corporation is not a corporation of the State of Florida and that the report is required by Chapter 607, Florida Statutes, and that my name appears on the list of officers and directors as set forth on the enclosed with an affidavit.

SIGNATURE

*Rick Holloway*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-95 (767) 649-7777