2007 FOR PROFIT CORPORATION

FILED Apr 06, 2007 08:00 A Secretary of State **ANNUAL REPORT** DOCUMENT # M45017 1. Entity Name **MEJH CORPORATION** Principal Place of Business Mailing Address 6480 SW 62ND AVE 9010 SW 140TH ST MIAMI, FL 33143 MIAMI, FL 33176 US No Chg-P CR2E034 (11/05) 04022007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2765596 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MIDDLEBROOKS, JOSEPH DO NOT WRITE 6480 SW 62ND AVENUE MIAMI, FL 33143 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstaling) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE MIDDLEBROOKS, JOS NAME 9010 SW 140 ST STREET ADDRESS CITY-ST-ZIP MIAMI, FL U00000692796 04/16/07-80014-011 150.00 NAME

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplierdental 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if hanged, or on an attachment with an address, with all other like empowered.

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CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR