2006 FOR PROFIT CORPORATION

DO NOT WRITE IN THIS SPACE

ANNUAL REPORT DOCUMENT # P00000017521 1. Entity Name M.J.H. CORP.

Principal Place of Business

4410 W. 16TH AVE

#18

HIALEAH, FL 33012



Mailing Address

7445 W 4 AVE

HIALEAH, FL 33014

FILED May 01, 2006 8:00 am Secretary of State

05-01-2006 90371 024 ***158.75



04262006

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0982675

Not Applicable \$8.75 Additional

Applied For

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

PANDO, ANGELA A 2604 WEST 68TH PLACE HIALEAH, FL 33019-5404

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				IN THIS STACE		
8. The above the obligat	named entity submits this statement for the pions of registered agent.	urpose of changing its registered	office or i	egistered agent, or b	oth, in the State of Florida. I am familiar with, and accept	_
SIGNATURE_	Signature, typed or printed name of registered agent and title if	applicable. (NOTE: Registered Ag	ent signatur	e required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Financin Trust Fund Contribution.	g 🗆	\$5.00 May Be Added to Fees		_
10.	OFFICERS AND DIREC	TORS				Ⅎ
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PINERO, HIRAM 2604 WEST 68TH PLACE HIALEAH, FL 330165404					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ** PANDO, ANGELA A 2604 WEST 68TH PLACE HIALEAH, FL 330165404				•	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. I hereby	certify that the information supplied with this fil	ling does not qualify for the exemp	otions co	ntained in Chapter 11	9, Florida Statutes. I further certify that the information	

indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR