

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000086849

Entity Name: MAJIDA II, INC.

FILED
Apr 26, 2005
Secretary of State

Current Principal Place of Business:

9801 VONN ROAD
SEMINOLE, FL 33776

New Principal Place of Business:

11076 70TH AVE N
SEMINOLE, FL 33772

Current Mailing Address:

9801 VONN ROAD
SEMINOLE, FL 33776

New Mailing Address:

11076 70TH AVE N
SEMINOLE, FL 33772

FEI Number: 59-3674449

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MUGHARBEL, MARGARET
9801 VONN ROAD
SEMINOLE, FL 33776 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MUGHARBEL, MOKHLESS K
Address: 9801 VONN ROAD
City-St-Zip: SEMINOLE, FL 33776

Title: VD () Delete
Name: MUGHARBEL, MARGARET K
Address: 9801 VONN RD
City-St-Zip: SEMINOLE, FL 33776

Title: SD () Delete
Name: STEVENS, MIMI
Address: 7508 140TH ST N
City-St-Zip: SEMINOLE, FL 33776

Title: TD () Delete
Name: MUGHARBEL, MICHAEL K
Address: 11116 KAPOK GRAND CIR
City-St-Zip: MADEIRA BEACH, FL 33708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARGARET MUGHARBEL

VD

04/26/2005

Electronic Signature of Signing Officer or Director

Date