

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000021177

FILED
Mar 05, 2008
Secretary of State

Entity Name: MJ PHOTOCOPY ENTERPRISES, INC.

Current Principal Place of Business:

12494 NW 38 AVE.
OPALOCKA, FL 33054

New Principal Place of Business:

Current Mailing Address:

12494 NW 38 AVE
OPALOCKA, FL 33054

New Mailing Address:

12494 NW 38 AVE.
OPALOCKA, FL 33054

FEI Number: 65-1081331

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILANES, EVER
12494 NW 38 AVE
OPALOCKA, FL 33054 US

Name and Address of New Registered Agent:

MJ PHOTOCOPY ENT. INC.
12494 NW 38 AVE
OPALOCKA, FL 33054 US

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: EVER MILANES

03/05/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: MILANES, ALFREDO
Address: 12494 NW 38 AVE
City-St-Zip: OPALOCKA, FL 33054

Title: DVP () Delete
Name: MILANES, EVER
Address: 12494 NW 38 AVE
City-St-Zip: OPALOCKA, FL 33054

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 exemption stated in Chapter 119, 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: EVER MILANES

DVP

03/05/2008

Electronic Signature of Signing Officer or Director

Date