

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Sep 16, 2003 8:00 am
Secretary of State

09-02-2003 90191 023 ***158.75

DOCUMENT # <u>P02000048589</u>			
1. Entity Name <u>MJL INC</u>			
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business <u>21073 POWERLINE RD</u>		3. Mailing Address <u>21073 POWERLINE RD</u>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State <u>BOCA RATON FL</u>		City & State <u>BOCA RATON FL</u>	
Zip <u>33433</u>	Country	Zip <u>33433</u>	Country
4. FEI Number <u>81-0550352</u>		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required		DO NOT WRITE IN THIS SPACE	
DO NOT WRITE IN THIS SPACE			
7. Name and Address of Current Registered Agent			
Name <u>MOHAMED EL KABBANY</u>			
Street Address (P.O. Box Number is Not Acceptable) <u>21073 POWERLINE RD</u>			
City <u>BOCA RATON</u>		FL Zip Code <u>33433</u>	
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 <u>Mohamed El Kabbany</u>		DATE <u>9/9/03</u>	
January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MOHAMED KABBANY 21073 POWERLINE RD BOCA RATON FL 33433	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BOZENA KABBANY 21073 POWERLINE RD BOCA RATON FL 33433	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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DO NOT WRITE IN THIS SPACE			
12. I hereby certify that the information supplied with this filing does not qualify 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 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 807, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, will or other line empowered.			
SIGNATURE: <u>Mohamed El Kabbany</u>		DATE <u>8/29/03</u>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR <u>MOHAMED KABBANY</u>		Daytime Phone #	

CR2E034B (12/02)