

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000033022

Entity Name: M.J. FRAMING, INC.

FILED
Mar 20, 2004
Secretary of State

Current Principal Place of Business:

4723 GLADIATOR CIRCLE
GREENACRES, FL 33463

New Principal Place of Business:

17609 86TH STREET NORTH
LOXAHATCHEE, FL 33470

Current Mailing Address:

4723 GLADIATOR CIRCLE
GREENACRES, FL 33463

New Mailing Address:

17609 86TH STREET NORTH
LOXAHATCHEE, FL 33470

FEI Number: 13-4249833

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, TIMOTHY K
675 WEST INDIANTOWN ROAD SUTIE 103
JUPITER, FL 33458

Name and Address of New Registered Agent:

MOYA, TITO J
17609 86TH STREET NORTH
LOXAHATCHEE, FL 33470

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: TITO JACINTO MOYA

03/20/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MOYA, TITO
Address: 4723 GLADIATOR CIRCLE
City-St-Zip: GREENACRES, FL 33463

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MOYA, TITO
Address: 17609 86TH STREET NORTH
City-St-Zip: LOXAHATCHEE, FL 33470

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: TITO JACINTO MOYA

D

03/20/2004

Electronic Signature of Signing Officer or Director

Date