

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 17, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000125769	
1. Entity Name MJB & COMPANY INC	
Principal Place of Business 404 W SAUNDERS STREET PLANT CITY, FL 33563	Mailing Address 404 W SAUNDERS STREET PLANT CITY, FL 33563



03072005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0406780	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent RIVERVIEW FINANCIAL & ACCOUNTING SVC INC 7035 US HWY 301 SOUTH RIVERVIEW, FL 33569		DO NOT WRITE IN THIS SPACE
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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 _____
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

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	P BEATTY, MICHAEL J 404 W SAUNDERS STREET PLANT CITY, FL 33563
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BEATTY, AMY O 404 W SAUNDERS STREET PLANT CITY, FL 33563
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIR BEATTY, MICHAEL A 404 W SAUNDERS STREET PLANT CITY, FL 33563
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIR BEATTY, ARO R 404 W SAUNDERS STREET PLANT CITY, FL 33563
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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03/17/05-80016-010 150.00

**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 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: Michael J. Beatty Michael J. Beatty 03/08/05 (813) 659-0605
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #