2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000109442

Entity Name: MAJJC ENTERPRISES, INC.

FILED Nov 14, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

14500 NE 6TH AVENUE NORTH MIAMI, FL 33161

Current Mailing Address: New Mailing Address:

18954 NW 91ST AVENUE P O BOX 171906 HIALEAH, FL 33018 P O BOX 171906 HIALEAH, FL 33017

FEI Number: 20-1714232 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ANTOINETTE PATTERSON
18954 NW 91ST AVENUE
HIALEAH, FL 33018 US

ANTOINETTE PATTERSON
1150 NE 211TH TERRACE
MIAMI, FL 33179 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: ANTOINETTE PATTERSON 11/14/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: VP (X) Change () Addition Name: CLARKE, MARTIN A Name: CLARKE, JENDAYI L

 Name:
 CLARKE, MARTIN A
 Name:
 CLARKE, JENDAYI L

 Address:
 2130 NW 158TH STREET
 Address:
 P O BOX 171906

 City-St-Zip:
 OPA LOCKA, FL 33054
 City-St-Zip:
 HIALEAH, FL 33017 US

 Title:
 P, T
 () Delete
 Title:
 P, T
 (X) Change () Addition

 Name:
 PATTERSON, ANTOINETTE
 Name:
 PATTERSON, ANTOINETTE

Address: 18954 NW 91ST AVENUE Address: P O BOX 171906
City-St-Zip: HIALEAH, FL 33018 City-St-Zip: HIALEAH, FL 33017 US

Title: () Delete Title: VP () Change (X) Addition

 Name:
 Name:
 CLARKE, JOSHUA

 Address:
 Address:
 P O BOX 171906

 City-St-Zip:
 City-St-Zip:
 HIALEAH, FL 33017 US

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: ANTOINETTE PATTERSON P 11/14/2008