2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000158232

Entity Name: MMAJJ INC

FILED Nov 02, 2005 Secretary of State

Littly Nai	iie. WilVIAGO IIV						
Current Principal Place of Business:				New Principal Place of Business:			
708 FLORESTA DR PORT ST LUCIE, FL 34983				4958 SE ASKEW AVE STUART, FL 34997			
Current Mailing Address:				New Mailing Address:			
708 FLORESTA DR PORT ST LUCIE, FL 34983				4958 SE ASKEW AVE STUART, FL 34997			
FEI Number:	20-2678778	FEI Number Applied For()	FEI Nur	nber Not Appl	icable ()	Certific	ate of Status Desired (X)
Name and	Address of C	urrent Registered Agent:		Name and	Address of	New Reg	gistered Agent:
A1A REGISTERED AGENTS INC 92 SADBERRY RD QUINCY, FL 32351 US				MAJEWSKI, DANIEL M 4958 SE ASKEW AVE STUART, FL 34997 US			
	named entity s e of Florida.	submits this statement for the p	ourpose o	of changing i	ts registered	office or I	registered agent, or both,
SIGNATUF	RE: DANIEL N	MAJEWSKI				1	11/02/2005
	Electron	ic Signature of Registered Age	ent				Date
		3(2)(b), F.S., the corporation did no	ot receive t	he prior notic	e.		
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	DP () MAJEWSKI, DA 708 FLORESTA PORT ST LUCIE	DR		Title: Name: Address: City-St-Zip:	DP () MAJEWSKI, D 4958 SE ASKE STUART, FL 3	ÁN EW AVE.	() Addition
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	TR (PADULA, MAR 3228 SE BRO STUART, FL 3	K A OK ST	(X) Addition
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	TR (MAJEWSKI, A 976 SW 36TH PALM CITY, F	LOYSIUS TERR	(X) Addition B
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	TR (MAJEWSKI, M 976 SW 36 TE PALM CITY, F	IYKAL B RR	(X) Addition

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: DAN MAJEWSKI DP 11/02/2005