

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000003665

Entity Name: MJ 18 ENTERPRISES INC.

FILED  
May 30, 2007  
Secretary of State

## Current Principal Place of Business:

277 OCEAN BLVD  
GOLDEN BEACH, FL 33160 US

## New Principal Place of Business:

## Current Mailing Address:

277 OCEAN BLVD  
GOLDEN BEACH, FL 33160 US

## New Mailing Address:

FEI Number: 20-2158278

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MIMOUN, JONAS  
277 OCEAN BLVD  
GOLDEN BEACH, FL FL US

## Name and Address of New Registered Agent:

MIMOUN, JONAS  
277 OCEAN BLVD  
GOLDEN BEACH, FL 33160 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: JONAS MIMOUN

05/30/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MIMOUN, JUDY  
Address: 277 OCEAN BLVD  
City-St-Zip: GOLDEN BEACH, FL 33160 US

Title: VD ( ) Delete  
Name: MIMOUN, MICHAEL  
Address: 277 OCEAN BLVD  
City-St-Zip: GOLDEN BEACH, FL 33160 US

Title: SD ( ) Delete  
Name: MIMOUN, JONAS  
Address: 277 OCEAN BLVD  
City-St-Zip: GOLDEN BEACH, FL 33160 US

Title: TD ( ) Delete  
Name: BEN-SAADON, JENNIFER  
Address: 277 OCEAN BLVD  
City-St-Zip: GOLDEN BEACH, FL 33160 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JONAS MIMOUN

SD

05/30/2007

Electronic Signature of Signing Officer or Director

Date