

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 14, 2008 8:00 am**  
**Secretary of State**

05-14-2008 90011 009 \*\*\*150.00

DOCUMENT # P05000122100

1. Entity Name  
MCJ EQUIPMENT CORP



Principal Place of Business  
4972 S.W. 164 AVENUE  
MIRAMAR, FL 33027

Mailing Address  
4972 S.W. 164 AVENUE  
MIRAMAR, FL 33027

2. Principal Place of Business - No P.O. Box #

14729 SW 5th St

Suite, Apt. #, etc.

3. Mailing Address

14729 SW 5th St

Suite, Apt. #, etc.



05062008

Chg-P

CR2E034 (12/06)

City & State

Pembroke Pines

City & State

Pembroke Pines

4. FEI Number

03-0569437

Applied For

Not Applicable

Zip

33027

Country

USA

Zip

33027

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

GALUIS, JEHOSON J  
4972 S.W. 164 AVENUE  
MIRAMAR, FL 33027

7. Name and Address of New Registered Agent

Name Jehison J. Galvis

Street Address (P.O. Box Number is Not Acceptable)

14729 SW 5th St

City Pembroke Pines

FL

Zip Code

33027

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

Jehison J. Galvis

05/06/2008

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**  
**Due by September 12, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be**  
**Added to Fees**

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

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
DPS  
GALVIS, JEHOSON J  
4972 S.W. 164 AVENUE  
MIRAMAR, FL 33027 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
D  
PEDRERA, NICOLE  
4972 S.W. 164 AVENUE  
MIRAMAR, FL 33027 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
DPS  
galvis, Jehison J  
14729 SW 5th St Pembroke Pines 33027 ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
D  
Pedrera, Nicole  
14729 SW 5th St Pembroke Pines 33027 ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Jehison J. Galvis

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/06/2008

Date

(26177) 4388

Daytime Phone #