

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Apr 16 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000004758 (7)

1. Corporation Name
MMJ RESTAURANTS II, INC.



Principal Place of Business
888 E. LAS OLAS BLVD.
2208
FT. LAUDERDALE FL 33301
US

Mailing Address
888 E. LAS OLAS BLVD.
2208
FT. LAUDERDALE FL 33301-2238
US

2. Principal Place of Business
21 3475 SHERIDAN ST.
Suite/Apt. #, etc.
22 315
City & State
23 Hollywood FL
Zip
24 33021
Country
25 USA

2a. Mailing Address
26 3475 SHERIDAN ST.
Suite/Apt. #, etc.
27 315
City & State
28 Hollywood FL
Zip
29 33021
Country
30 USA

3. Date Incorporated or Qualified
01/21/1993

3a. Date of Last Report
05/01/1996

4. FEI Number
65-0387559

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

RICHTER, MARY ANNE
888 E. LAS OLAS BLVD.
2208
FT. LAUDERDALE FL 33301

10. Name and Address of New Registered Agent

81 Name MARK MILITELLO
82 Street Address (P.O. Box Number is Not Acceptable)
3475 SHERIDAN ST., STE 315
83
84 City Hollywood FL 85 Zip Code 33021

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE MARK MILITELLO, VICE PRESIDENT 4/9/97
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	MILITELLO, MARK	
STREET ADDRESS	888 E. LAS OLAS BLVD., SUITE 2208	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	VS	<input checked="" type="checkbox"/> DELETE
NAME	RICHTER, MARY ANNE	
STREET ADDRESS	888 E. LAS OLAS BLVD., SUITE 2208	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	VT	<input type="checkbox"/> DELETE
NAME	DIMARCO, JOHN	
STREET ADDRESS	888 E LAS OLAS BLVD., SUITE 2208	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	VICE PRESIDENT / SECRETARY <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	MILITELLO, MARK
1.3 STREET ADDRESS	3475 SHERIDAN ST, STE 315
1.4 CITY-ST-ZIP	Hollywood FL 33021
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	DIMARCO, JOHN
3.3 STREET ADDRESS	3475 SHERIDAN ST, STE 315
3.4 CITY-ST-ZIP	Hollywood FL 33021
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: MARK MILITELLO 4/9/97 954-894-1991
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (9/96)