FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
*ANNUAL REPORT
1995

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

APPROVED
AND
FILED

95 MAY -1 AM 8:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000009430 (8)**

1. Corporation Name
MBJ INTERNATIONAL INC.

Principal Place of Business	Mailing Address
10801 STARKEY RD UNIT 103 LARGO FL 34647	10801 STARKEY RD UNIT 103 LARGO FL 34647

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/09/1993
3a. Date of Last Report: 04/29/1994

2. Principal Place of Business	2a. Mailing Address
21 10801 STARKEY RD	26 10801 STARKEY RD
Suite, Apt. #, etc. 22 UNIT 104	Suite, Apt. #, etc. 27 UNIT# 104
City & State 23 LARGO FL	City & State 28 LARGO FL
Zip / Country 24 34647 / 25	Zip / Country 29 34647 / 30

4. FEI Number: 59-3164283 ☐ 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	10. Name and Address of New Registered Agent
MAZZOLA, JOHN 10801 STARKEY RD UNIT 103 LARGO FL 34647	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City **FL** 85 Zip Code

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: [signature] JOHN MAZZOLA 4/28/95
Signature, type or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE: D NAME: MAZZOLA, JOHN STREET ADDRESS: 10801 STARKEY RD #103 CITY-ST-ZIP: LARGO FL 34647	11 TITLE: D ☒ Change ☐ Addition 12 NAME: MAZZOLA, John 13 STREET ADDRESS: 10801 STARKEY RD #104 14 CITY-ST-ZIP: LARGO FL 34647
TITLE: D NAME: MAZZOLA, JOAN STREET ADDRESS: 10801 STARKEY RD #103 CITY-ST-ZIP: LARGO FL 34647	21 TITLE: D ☒ Change ☐ Addition 22 NAME: MAZZOLA, JOAN 23 STREET ADDRESS: 10801 STARKEY RD #104 24 CITY-ST-ZIP: LARGO FL 34647
TITLE NAME STREET ADDRESS CITY-ST-ZIP	31 TITLE ☐ Change ☐ Addition 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	41 TITLE ☐ Change ☐ Addition 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	51 TITLE ☐ Change ☐ Addition 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	61 TITLE ☐ Change ☐ Addition 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: [signature] JOHN MAZZOLA 4/28/95 813-398-7978
SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR — Date — Daytime Phone #

0963336 CP