

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P93000014236 (2)

1. Corporation Name

MARYJO ENTERPRISES INC.



Principal Place of Business

1235 SW 19TH AVE.  
FT. LAUDERDALE FL 33312

Mailing Address

1235 SW 19TH AVE.  
FT. LAUDERDALE FL 33312

3. Date Incorporated or Qualified  
02/15/1993

3a. Date of Last Report  
03/02/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

65-0394977

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

BAGLIO, MARY JO  
1235 SW 19TH AVE  
FT. LAUDERDALE FL 33312

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 typed or printed next to registered agent and to all applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE  
NAME D  
STREET ADDRESS BAGLIO, MARY JO  
CITY-STATE-ZIP 1235 SW 19TH AVE  
FT. LAUDERDALE FL 33312

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

TITLE ☐ DELETE

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

TITLE ☐ DELETE

3.1 TITLE

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3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

TITLE ☐ DELETE

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5.1 TITLE

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6.1 TITLE

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6.4 CITY-STATE-ZIP

TITLE ☐ DELETE

7.1 TITLE

7.2 NAME

7.3 STREET ADDRESS

7.4 CITY-STATE-ZIP

TITLE ☐ DELETE

8.1 TITLE

8.2 NAME

8.3 STREET ADDRESS

8.4 CITY-STATE-ZIP

TITLE ☐ DELETE

9.1 TITLE

9.2 NAME

9.3 STREET ADDRESS

9.4 CITY-STATE-ZIP

TITLE ☐ DELETE

10.1 TITLE

10.2 NAME

10.3 STREET ADDRESS

10.4 CITY-STATE-ZIP

TITLE ☐ DELETE

11.1 TITLE

11.2 NAME

11.3 STREET ADDRESS

11.4 CITY-STATE-ZIP

TITLE ☐ DELETE

12.1 TITLE

12.2 NAME

12.3 STREET ADDRESS

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TITLE ☐ DELETE

13.1 TITLE

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14.1 TITLE

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15.1 TITLE

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TITLE ☐ DELETE

16.1 TITLE

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17.1 TITLE

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18.1 TITLE

18.2 NAME

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18.4 CITY-STATE-ZIP

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19.1 TITLE

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20.1 TITLE

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20.4 CITY-STATE-ZIP

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21.1 TITLE

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23.1 TITLE

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24.1 TITLE

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27.1 TITLE

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27.4 CITY-STATE-ZIP

TITLE ☐ DELETE

28.1 TITLE

28.2 NAME

28.3 STREET ADDRESS

28.4 CITY-STATE-ZIP

TITLE ☐ DELETE

29.1 TITLE

29.2 NAME

29.3 STREET ADDRESS

29.4 CITY-STATE-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/1/96 305 975-5960

CR2E034 (12/95)