

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
Mar 19 1997 8:00am
Secretary of State

DOCUMENT # **P93000084015 (5)**

1. Corporation Name

MBJ VENTURE CORP.



Principal Place of Business

**2046 MCKINLEY ST.
SUITE 3
HOLLYWOOD FL 33020**

Mailing Address

**P.O. BOX 222896
HOLLYWOOD FL 33022-2896**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

3. Date Incorporated or Qualified

12/08/1993

3a. Date of Last Report

04/02/1996

4. FEI Number

65-0462988

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

**FEIGENBAUM, MARTHA
125 CRAWFORD BLVD
BOCA RATON FL 33432**

10. Name and Address of New Registered Agent

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 of person filing this report is required when filing this report.)

(NOTE: Registered Agent's signature required when reinstating.)

DATE

12. OFFICERS AND DIRECTORS

12.1 TITLE ☐ DELETE
NAME **D KATULKA, MICHAEL SR.**
STREET ADDRESS **3949 S.W. 12TH COURT**
CITY, ST, ZIP **FT LAUDERDALE FL 33312**

12.2 TITLE ☐ DELETE
NAME **LIPSITZ, BARRY**
STREET ADDRESS **2046 MCKINLEY ST., SUITE 3**
CITY, ST, ZIP **HOLLYWOOD FL 33020**

12.3 TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY, ST, ZIP

12.4 TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY, ST, ZIP

12.5 TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY, ST, ZIP

12.6 TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE ☐ Change ☐ Addition
13.2 NAME
13.3 STREET ADDRESS
13.4 CITY-ST-ZIP

13.5 TITLE ☐ Change ☐ Addition
13.6 NAME
13.7 STREET ADDRESS
13.8 CITY-ST-ZIP

13.9 TITLE ☐ Change ☐ Addition
13.10 NAME
13.11 STREET ADDRESS
13.12 CITY-ST-ZIP

13.13 TITLE ☐ Change ☐ Addition
13.14 NAME
13.15 STREET ADDRESS
13.16 CITY-ST-ZIP

13.17 TITLE ☐ Change ☐ Addition
13.18 NAME
13.19 STREET ADDRESS
13.20 CITY-ST-ZIP

13.21 TITLE ☐ Change ☐ Addition
13.22 NAME
13.23 STREET ADDRESS
13.24 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 included 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:

Michael Katulka
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
MICHAEL KATULKA

3/14/97 **954 584 1642**
Daytime Phone #

0158781

CR2E034 (9/96)