

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 # P94000020194 (4)

1. Corporation Name

MARK JOHNSON ENTERPRISES, INC.



Principal Place of Business

Mailing Address

225 ST. CROIX PLACE  
KEY LARGO FL 33037  
US

130 CORAL AVE  
TAVERN FL 33070  
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc. 26 260 Bougainvillea ST

22 City & State 27 TAVERNIER FL

23 Zip 25 33070 29 33070 30 US

24 25 29 30

9. Name and Address of Current Registered Agent

JOHNSON, MARK D  
130 CORAL AVE  
TAVERNER FL 33070

3. Date Incorporated or Qualified  
03/15/1994

3a. Date of Last Report  
05/01/1995

4. FEI Number 65-0474884 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

10. Name and Address of New Registered Agent

81 Name MARK Johnson  
82 Street Address (P.O. Box Number is Not Acceptable) 260 BOUGAINVILLEA ST  
83 TAVERNIER, FL 33070  
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 name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
	D	JOHNSON, MARK D	225 ST. CROIX PLACE	
		KEY LARGO FL 33037		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition

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)(k), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

04/25/96 305 852

CR2E034 (12/95)