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Secretary of State

07-22-1999 90002 021 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P94 000052738(9) ✓

1. Corporation Name
MJCT ENTERPRISES, INC

Principal Place of Business Mailing Address

4729 S.W. 56 Street TRENTON, FL 32693 **4729 SW 56 ST TRENTON, FL 32693**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
07/13/1994

2. Principal Place of Business 2a. Mailing Address

21 **4729 S.W. 56 ST** 26 **4729 SW 56 ST**

Suite, Apt. #, etc. Suite, Apt. #, etc.

22 Suite, Apt. #, etc. 27 **3**

City & State 23 **TRENTON FL** 28 **TRENTON, FL 32693**

Zip 24 **32693** Country 25 **USA** Zip 29 **32693** Country 30 **USA**

4. FEI Number **65-0504801** 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 owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent

RODE, Jeffrey W.
4729 SW 56 ST
TRENTON, FL 32693

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 **Jeffrey W. Rode** *Jeffrey W. Rode* **7/9/99**
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	D <input type="checkbox"/> DELETE
NAME	RODE Jeffrey W.
STREET ADDRESS	4729 SW 56 ST
CITY-ST-ZIP	TRENTON, FL 32693
TITLE	D <input type="checkbox"/> DELETE
NAME	RODE, CORA A.
STREET ADDRESS	4729 S.W. 56 ST
CITY-ST-ZIP	TRENTON, FL 32693
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	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
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	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
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 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, with all other like empowered.

SIGNATURE: **CORA A. RODE** *Cora A. Rode* **7/9/99** **(352) 463-8118**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)

**Lauderdale
Lawn and
Landscaping**

4729 Southwest 56th Street, Trenton, FL 32693 (352) 463-8118

P94000052738
593265-90002-21

July 9, 1999

Division of Corporations
P O Box 6327
Tallahassee, FL 32314

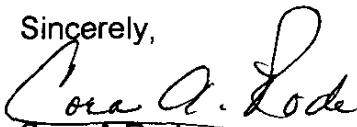
Dear Sir/Madam:

Upon reviewing our corporation status we realized that due to our recent move that the postmaster did not forward our 1999 Profit Corporation Annual Report Packet for MJCT ENTERPRISES, INC. D/B/A Lauderdale Lawn and Landscaping along with all our other mail. We phoned your office for a form to be mailed as soon as possible to be sent to our new address. During our conversation with your status department they stated that sometimes the postmaster does not forward certain mail and we could forward you this letter stating that we had not received the form to file our annual report and you certainly would consider our plea to accept the original filing fee of \$150.00. due to the postmaster not forwarding the form and our good standing since 1994.

Enclosed you will find our 1999 Profit Corporation Annual Report completed along with our check #4029 in the amount of \$150.00 payable to Department of State.

Thank you for your consideration and should you have any questions, you may reach us at (352) 463-8118.

Sincerely,


Cora A Rode
Secretary/Treasurer

**A Division of MJCT Enterprises, Inc.
A Drug Free Company**