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

**CORPORATION ANNUAL REPORT** 1998

officer or director of the corpo Block 12 or Block 13 if change



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## P95000007502 (4) DOCUMENT #

MAJESTIC LAND HOLDINGS, INC.

## **FILED** May 11 1998 8:00am Secretary of State



| Principal Place  | of Business  | Mailing Address  |                   |                              |   |                    |                   |
|--|--|--|-------------------|------------------------------|---|--------------------|-------------------|
| •  |  | 4061 ROYAL PALM  |                   |                              |   |                    |                   |
| 4061 ROYAL PALM BEACH BLVD.<br>ROYAL PALM BEACH BLVD. FL 33411 |  | ROYAL PALM BEAC  |                   | 411                          |   |                    |                   |
|  |  |  |                   |                              | DO NOT WRITE IN TH  | IIS SPACE          |                   |
| 1  |  |  |                   |                              | 3. Date Incorporated or Qualified   |                    |                   |
|  |  |  |                   |                              | 01/24/1995  |                    |                   |
| 2. Principal Pla   | ce of Business   | 2a. Mailing Address  |                   |                              | 4. FEI Number   | A <sub>F</sub>     | plied For         |
| 21   |  | 26   |                   |                              | 65-0560019  |                    | ot Applicable     |
| Sulte, Apt. #,   | , etc.   | Suite, Apt. #, etc   | <b>:</b> .        |                              | 5. Certificate of Status Desired  | •                  | Additional        |
| 22   |  | 27   |                   |                              |   |                    | equired           |
| City & State   |  | City & State   |                   |                              | 6, Election Campaign Financing  | \$5.00 May Be      |                   |
| 23   |  | 28   |                   |                              | Trust Fund Contribution   |                    | to Fees           |
| Zip  | Country  | <del></del>  | Z(p Country       |                              | 8. This corporation owes or has paid the  |                    | -                 |
| 24   | 25   | 29   | 30                |                              | Personal Property Tax due June 30.  | Yes                | No                |
|  | 9. Name and Address of Cu  | rrent Registered Agent   |                   | 81 Name                      | 10. Name and Address of New Register  | eo Agent           | <del>,</del>      |
|  | RGE, JOHN P  |  |                   | oi ivaine                    |   |                    |                   |
|  | I <b>ro</b> yal Palm Beach Bl\   |  | Ì                 | 82 Street Add                | dress (P.O. Box Number is Not Acceptable)   |                    | ·····             |
| ROY  | 'al palm beach blvd. Fl  | . 33411  |                   |                              |   |                    |                   |
|  |  | Λ  |                   | 83                           |   |                    |                   |
|  |  | /1   | ŀ                 | 84 City                      |   | . 85 Zip           | Code              |
|  | Δ  |  |                   | '                            |   | -L     `           |                   |
| 11. Pursuant to  | the provisions of Sections 607   | .0502 and 607, 508, Florida S                                    | Statutes the ab   | ove-named cor                | rporation submits this statement for the purpose  | e of changing it   | ts registered     |
| sgent. I am  | familiar with, arroxicons the o  | iblightens of, Section 107 050                                   | 5 Florida Stati   | ites.                        | ation's board of directors. I hereby accept the   | 4 A C              | rogistored        |
| SIGNATURE _  | IMPIN  | VIVX   |                   |                              | 48  | 415V               |                   |
| SI   |  | stagent and bite it possable.                                    | (NOTE: Registered | Agent signature requ         | uired when reinstating) DAT   | EL T               |                   |
| 12.  |  | AND DIRECTORS  | 13.               |                              | ADDITIONS/CHANGES TO OFFICERS   |                    |                   |
| TITLE  | P  | ☐ DELETE   | £ 1.1 TIT         | LE                           |   | ☐ Change           | Addition          |
| NAME   | GEORGE, JOHN   |  | 1.2 NA            | ME                           |   |                    |                   |
| STREET ADDRESS   | 14466 68TH ST N  |  | 1.3 \$7           | REET ADDRESS                 |   |                    |                   |
| CITY-ST-ZIP  | LOXAMATCHEE FL 33470   |  |                   | Y - \$1 - ZIP                |   |                    |                   |
| TITLE  |  | ☐ DELETE   | E 2.1 TIT         | LE                           |   | L. Change          | Addition          |
| NAME   |  |  | 2.2 NA            | ME                           |   |                    |                   |
| STREET ADDRESS   |  |  | 2.3 \$1           | REET ADDRESS                 |   |                    |                   |
| CITY-ST-ZIP  |  |  | 2. 4 CI           | TY-ST-ZIP                    |   |                    |                   |
| TITLE  |  | ☐ DELETE   | E 3.1 TIT         | LE                           |   | Change             | Addition Addition |
| NAME   |  |  | 3.2 NA            | ME                           |   |                    |                   |
| STREET ADDRESS   |  |  | 3.3 ST            | REET ADDRESS                 |   |                    |                   |
| CITY-ST-ZIP  |  |  |                   | TY - ST - ZIP                |   |                    |                   |
| TITLE  |  | DELETE   | E . 4.1 TH        | LE                           |   | ☐ Change           | ☐ Addition        |
| NAME   |  |  | 4. 2 N/           | ME                           |   |                    |                   |
| STREET ADDRESS   |  |  | 4.3 ST            | REET ADDRESS                 |   |                    |                   |
| CITY-ST-ZIP  |  |  |                   | Y-ST-ZIP                     |   |                    |                   |
| TITLE  |  | DELETE   | É 5.1 TIT         | LF                           |   | Change             | Addition          |
| NAME   |  |  | 5.2 NA            | ME                           |   |                    |                   |
| STREET ADDRESS   |  |  | 5.3 ST            | REET ADDRESS                 |   |                    |                   |
| CITY-ST-ZIP  |  |  |                   | Y-S1-ZIP                     |   |                    |                   |
| TITLE  |  | ☐ DELETE   |                   |                              | · · · · · · · · · · · · · · · · · · ·   | Change             | Addition          |
| NAME   |  | _  | 6.2 NA            |                              |   | -                  |                   |
| STREET ADDRESS   |  |  |                   | REET ADDRESS                 |   |                    |                   |
| l F  |  |  |                   |                              |   |                    |                   |
| CITY-ST-ZIP  | utile that the information supplie   | ed with this filing decement and                                 |                   | Y-SI-ZIP<br>motion stated in | in Section 119.07(3)(i), Florida Statutes. I furthe   | r certify that the | information       |
| indicated of   | n this annual report of supplemental in the corporation of the corporation or Mc | nental annual report is true and<br>receiver of trustee empowers | d accurate and    | that my signat               | ture shall have the same legal effect as if made quired by Chapter 607, Florida Statutes; and the | under oath; the    | at I am an        |