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PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # P95000092067 (4)

1. Corporation Name	(4)	
M.J. PAM CORPORATION		

Principal Place of Business Mailing Address 6610 N.E. 21ST AVENUE 6610 N.E. 21ST AVENUE FORT LAUDERDALE FL 33308 FORT LAUDERDALE FL 33308 3. Date Incorporated or Qualified 3a. Date of Last Report 12/01/1995 THIS IS FIRST Applied For 4. FEI Number 2. Principal Place of Business 2a. Mailing Address 65-0626818 Not Applicable 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 23 8. This corporation has liability for intangible tax under s 199.032, Ζıρ Country Ζiρ Yes Mo Florida Statutes 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name MANHART, MICHAEL S Street Address (P.O. Box Number is Not Acceptable) 82 **6610 N.E. 21ST AVENUE** FORT LAUDERDALE FL 33308 Zip Code 84 City 85 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 DATE (NOTE Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable (12/95)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. □ DELĒTE ☐ Change ☐ Addition 1.1 TITLE CR2E034 MANHART, MICHAEL S 1.2 NAME NAME **6610 N.E. 21ST AVENUE** 1.3 STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33308 1.4 CITY - ST-ZIP CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE MANHART, CHRISTINE K 2.2 NAME NAME **6610 N.E. 21ST AVENUE** STREET ADDRESS 2.3 STREET ADDRESS FORT LAUDERDALE FL 33308 2.4 CITY - ST - ZIP CITY-ST-ZIP ☐ Change Addition DELETE 3 1 TITLE TITLE 3 2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 34 CITY-ST-ZIP CHY-ST-Z(P ☐ Change Addition DELETE 4 1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 44 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition DELETE 5.1 TIDE TILLE 5.2 NAMÉ NAME 5.3 STREET ADDRESS STREET ADDRESS 5 4 CITY - ST - ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE 6. 1 TITLE THLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP CITY-ST-ZIP

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

MICHAEC J. MANHART 4-26-96 954-491.4493