

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000Q96723

1. Entity Name
MJO CONSULTING, INC.

FILED
Mar 26, 2001 8:00 am
Secretary of State
03-26-2001 90049 013 ***150.00

Principal Place of Business

565 SANCTUARY DRIVE
SUITE 603A
LONGBOAT KEY FL 34228

Mailing Address

1003 WEST SEVENTH ST.
404
FREDERICK MD 21701-8532
US

2. Principal Place of Business

3060 Grand Bay Blvd.

3. Mailing Address

615 West Patrick Street

Suite, Apt. #, etc.

Apt. 181

Suite, Apt. #, etc.

City & State

Longboat Key, Florida

City & State

Frederick, Maryland

Zip

34228-4015

Country

USA

Zip

21701

Country

USA

4. FEI Number

65-0639649

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75-Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

OHLHAUSEN, MARTIN J
565 SANCTUARY DRIVE
SUITE 603A
LONGBOAT KEY FL 34228

Name

Street Address (P.O. Box Number is Not Acceptable)

3060 Grand Bay Blvd.

Apt. 181

City

Longboat Key

FL

Zip Code

34228-4015

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

M. Ohlhausen
Martin J. Ohlhausen

President

3/23/01

2001

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSTD
OHLHAUSEN, MARTIN J
565 SANCTUARY DR., SUITE 603A
LONGBOAT KEY FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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☐ Delete

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CITY-ST-ZIP
☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

M. Ohlhausen
Martin J. Ohlhausen

President

3/23/2001

941-383-5312

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)