

FILED

May 12 1998 8:00am

Secretary of State

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

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT #

1. Corporation Name

P960000066078
MJS Financial Network Inc.

Principal Place of Business

Mailing Address

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 1/18/96	
21 799 Jefferly ST	26 799 Jefferly ST	4. FEI Number 65 0644630		Applied For Not Applicable	
22 211	27 211	5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23 Boca Raton FL	28 Boca Raton FL	6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24 33487	25 U.S.	29 33487	30 U.S.	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

 Mark Sadowski
 799 Jefferly ST Apt 211
 Boca Raton FL 33487

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 607.052 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 in application

(NOTE: Registered Agent signature required when reappointing)

DATE

4/24/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	11 TITLE	Change ☐ Addition ☐	
NAME	12 NAME	Change ☐ Addition ☐	
STREET ADDRESS	13 STREET ADDRESS	Change ☐ Addition ☐	
CITY-ST-ZIP	14 CITY-ST-ZIP	Change ☐ Addition ☐	
TITLE	21 TITLE	Change ☐ Addition ☐	
NAME	22 NAME	Change ☐ Addition ☐	
STREET ADDRESS	23 STREET ADDRESS	Change ☐ Addition ☐	
CITY-ST-ZIP	24 CITY-ST-ZIP	Change ☐ Addition ☐	
TITLE	31 TITLE	Change ☐ Addition ☐	
NAME	32 NAME	Change ☐ Addition ☐	
STREET ADDRESS	33 STREET ADDRESS	Change ☐ Addition ☐	
CITY-ST-ZIP	34 CITY-ST-ZIP	Change ☐ Addition ☐	
TITLE	41 TITLE	Change ☐ Addition ☐	
NAME	42 NAME	Change ☐ Addition ☐	
STREET ADDRESS	43 STREET ADDRESS	Change ☐ Addition ☐	
CITY-ST-ZIP	44 CITY-ST-ZIP	Change ☐ Addition ☐	
TITLE	51 TITLE	Change ☐ Addition ☐	
NAME	52 NAME	Change ☐ Addition ☐	
STREET ADDRESS	53 STREET ADDRESS	Change ☐ Addition ☐	
CITY-ST-ZIP	54 CITY-ST-ZIP	Change ☐ Addition ☐	
TITLE	61 TITLE	Change ☐ Addition ☐	
NAME	62 NAME	Change ☐ Addition ☐	
STREET ADDRESS	63 STREET ADDRESS	Change ☐ Addition ☐	
CITY-ST-ZIP	64 CITY-ST-ZIP	Change ☐ Addition ☐	

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 on Block 12 or Block 13 if changed, or on an attachment with an address.

CR2034 (10/97)