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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Apr 03 1997 8:00am Secretary of State

FILED

Secretary of State DIVISION OF CORPORATIONS 1997 DOCUMENT # P96000013038 (0) MJC INTERNATIONAL, INC. Principal Place of Business Mailing Address 1515 BINGLING BLVD. SHITE 1000 SARASOTA FL 54280 1515 PRINCHING BLVD SUPE-1000/ SAPASONA FL 84236-5718 7303 MIDNIGHT PSS CO SALASOTA FLA 34247 Date Incorporated or Qualified 3a. Date of Last Report FLA 34242 02/08/1996 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country This corporation has liability for intemplble tax under s. 199.032, Yes 🔲 No 24 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent B1 Name FERGESON, JAMES O JR 1515 RINGLING BLVD. SUITE 1000 82 Street Address (P.O. Box Number is Not Acceptable) SARASOTA FL 34236 В3 84 City 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. Sugardiscity; of or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition THUE 11 TITLE CLEGG, MARTIN J NAME 1.2 NAME 1515 RINGLING BLVD, SUITE 1000 STREET ADDRESS 1.3 STREET ADDRESS SARASOTA FL 34236 CITY - ST - ZIP 1.4 CITY-SY-ZIP DELETE THUE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADORESS 2.3 STREET ADDRESS CHY-S1-71P 2. 4 CITY - ST - ZIP DELETE Change Addition 1.114 31 TITLE NAME 3 2 NAME STREET ADDRESS 3.3 STREET ADDRESS C(1Y - S1 - 20) 3.4. CITY-\$1-ZIP DELETE Title 4.1 TITLE Change Addition NAME 4. 2 NAME 43 STREET ADDRESS CITY-ST-7IP 4.4 CITY-ST-7IP DELETE TIFLE 5.1 TOLE Change Addition 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS COLV -ST-76 54 DITY-ST-ZIP DELETE TOLE Addition 61 TITLE 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY: ST-ZIP 6.4 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filling 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

SIGNATURE: