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

Apr 30 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # P9600036264 (5) MRJ CONSULTING, INC. Principal Place of Business Mailing Address 316 HAMPTON HILLS COURT 316 HAMPTON HILLS COURT DEBARY FL 32713 DEBARY FL 32713 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/23/1996 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 59-3378996 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 Ζιρ Country Country 8, This corporation owes or has paid the current year Intangible Yes □ No 24 29 Personal Property Tax due June 30. 25 30 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name JUREK, MICHAEL R 316 HAMPTON HILLS COURT 82 Street Address (P.O. Box Number is Not Acceptable) DEBARY FL 32713 83 84 City Zip Code 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELCTE 1 1 TITLE Addition TITLE JUREK, JANET 1.2 NAME NAME 316 HAMPTON HILLS COURT 1.3 STREET ADDRESS STREET ADDRESS DEBARY FL 32713 CITY-ST-7IP 14 CITY - ST - ZIP DELETE TITLE 21 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2 4 CITY ST ZIP CITY ST-ZIP DELETE Change Addition TITLE 3.1 TIPLE NAME 32 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY - ST-ZIP DELETE Addition 4.1 TITLE TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 44 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME 53 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 54 CITY - ST - ZIP DELETE ☐ Change Addition 61 THILE TITLE

6.2 NAME

6.3 STREET ADDRESS

G 4 CITY - ST - ZIP 14. Thereby 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 suppliemental 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE:

NAME

STREET ADDRESS

CITY ST ZIP

4-18-98

407-444-6508

FILED