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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mottieum +

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000040371 (2)

MPJ ENTERPRISES, INC.

Principal Place of Business

Mailing Address

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FILED Jun 16 1997 8:00am Secretary of State



MIAMI FL 33155		MIAMI FL 33155-4748	MIAMI FL 33155-4748			
					3. Date Incorporated or Qualified 05/06/1996	3a. Date of Last Report
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number 65-067/4	Applied For
21		26			63-06114	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	 -		5. Certificate of Status Desired	S8./5 Additional
22		27			C. Sermicolo di Citta periodi	Fee Required
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
Zip Country		28	Zip Country		Trust Fund Contribution	
24	25	29	30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	
241	9. Name and Address of Curr		[30]		10. Name and Address of New Re	
PAL	ENCIA, MARCIAL L JR		8	Name		
6775 SW 44TH ST SUITE 59			-			
	MI FL 33155		82	Street Add	ress (P.O. Box Number is Not Acceptab	le)
THE ST	W 1 L 00 100		83	3		
			L.			
			84	City		FL 85 Zip Code
11. Pursuant office or reagent. I as	to≠he provisions of Sections 607.0. egistered agent, or both, in the Sta m familiar with, and accept the obl	502 and 607.1508, Florida State of Florida. Such change wigations of, Section 607.0505	atules, the abovas authorized by Florida Statule	ve-named corporates.	poration submits this statement for the p tion's board of directors. I hereby accep	
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable	(NOTE Registered A	ont signature requi	ired when reinstating)	DATE
12.		IND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12
TITLE	DP	DELETE	1.1 7/TLE			Change Addition
NAME	PALENCIA, MARCIAL L JR		1.2 NAME			
STREET ADDRESS	8775 SW 44TH ST SUITE 59		1.3 STREE	T ADDRESS		
CITY-ST-ZIP	MIAMI FL 33155		1.4 Cily-	ST-ZIP		
TITLE	VST	☐ DELETE	2.1 TI1L€			☐ Change ☐ Addition ☐
NAME	PALENCIA, MARY A		2.2 NAME			
STREET ADDRESS	6775 SW 44TH ST SUITE 59		2.3 STREE	T ADDRESS		
CITY-ST-2IP	MIAMI FL 33155		2 4 CITY	ST-ZIP		
TITLE		pelete	31 11TLE	}	Q.	Change
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREE	T ADDRESS		
CITY-ST-ZIP		T ACCETE	3.4. C(TY	-SI-ZIP		
TITLE		☐ DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAM			
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP		T of the	4.4 CI1Y-	S1-ZIP		The state of the s
TITLE		DELETE	5.1 TITLE	İ		Change L Addition
NAME			5.2 NAME			
STREET ADDRESS				T AODRESS		
CITY-ST-ZIP		T no tre	5 4 CITY-	SI-ZIP	<u></u>	Chones
TITLE		DELETE	6.1 TITLE	ĺ		Change Addition
NAME			6.2 NAME			
STREET ADDRESS			1	T ADDRESS		
CITY-ST-ZIP			6.4 CITY-	ST-ZIP		

14. I do 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 in Block 12 or Block 13 if changed, or on an attachment with an address.