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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000077574 (7)

M.N.J. ENTERPRISES, INC.

Principal Place of Business

Mailing Address

FILED
May 19 1997 8:00am
Secretary of State



\$305 EAGLELAKE DRIVE 5305 EAGLELAKE DRIVE PALM BEACH GARDENS FL 33418 PALM BEACH GARDENS FL 33418			1538				
					3. Date Incorporated or Qualified 09/18/1996	3a. Date of Le	ist Report
	ace of Business	2a. Mailing Address	En G 1 1	=1 x 00	4, FE Number 90 00		Applied For
21 <u>0505</u>	EABLE LK DK.	26 53 05 E			· 62-001 [24]		Not Applicable
22 POG	PIA. 33418	Suite, Apt. #, etc). ————————————————————————————————————		5. Certificate of Status Desired	L) Fe	75 Additional e Required
City & State		28 366	tla:	33418	Election Campaign Financing Trust Fund Contribution		00 May Be ded to Fees
21 ²¹⁹ 334	18 25 US	20 3341	30 Cou	ÜS.		Yes No	let s. 199.032,
	g. Name and Address of Current	Registered Agent ¹		04	10. Name and Address of New Re-	gistered Agent	
	ESTINO, DIANE R			B1 Name			
5305 EAGLELAKE DRIVE				82 Street Address (P.O. Box Number is Not Acceptable)			
PALM BEACH GARDENS FL 33418				83			
				84 City		FL 85	Zip Code
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.							
SIGNATURE Signature, typed or pointed harvis of registived agent and title if applicable (NOTE: Registered Agent is gnature required when reinstating) DATE							
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC	TORS IN 12
TITLE	D	☐ DELET	E 1.11	TLE .		Chai	nge 🔲 Addition 📑
NAME	CELESTINO, DIANE R		1.2 N	AMF			;
STREET ADDRESS	5305 EAGLELAKE DRIVE	140		TREET ADDRESS			}
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NAME DARECT ADDRESS			22 N				
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NAME		_	3.2 N	i			-
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CITY-ST-ZIP		T 5		ITY - ST - ZIP		——————————————————————————————————————	4.155
TITLE		☐ DELET		Į.		Cha	nge 🔲 Addition
NAME J			6.2 N	J			ļ
STREET ADDRESS			i	TREET ADDRESS			1
CITY-ST-ZIP	ov certify that the information supplied	with this filing door not		TY-51-7IP	id in Section 119 07(3)(i) Florida Statuta	I further cortifu	that the
information	n indicated on this annual report or ou	wan uus ming boes not oolomaatal aanual taas	quality for the	exemption state	ed in Section 119.07(3)(i), Florida Statutes	s. i luriner cerully Leffeet en it mad	mat uic

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 12 the changed, or on an attachment with an address

CIGNATURE:

VALUE R. CODOSTELLA

5-12-97 AHLOSDAL