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

DOCUMENT # P9700069130 (7)

MJM CAPITAL REALTY, INC.

Principal Place of Business

Mailing Address

FILED May 06 1998 8:00am Secretary of State



10315 NORTHWEST 2ND COURT 10315 NORTHWEST 2ND COURT MIAMI FL 33150 MIAMI FL 33150 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/11/1997 2. Principal Place of Business FEI Numbe Applied For Not Applicable \$8.75 Additional 27 NNYA MIA FL 5. Certificate of Status Desired TIAM! FL Fee Required 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible 25 USA 29

9. Name and Address of Current Registered Agent 30 ☐ No 24 USA Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent 81 Namo AMERILAWYER CHARTERED 343 ALMERIA AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) CORAL GABLES FL 33134 **B3** 84 City 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 Horida. 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 repetered agent and tibe if applicable (NOTE: Registered Agant signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change TITLE 1.1 TITLE Addition | MONESTIME, JEAN NAME 1.2 NAME 10315 NORTHWEST 2ND COURT STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33150** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE ☐ Change Addition JULES, JEAN NAME 2.2 NAME 10315 NORTHWEST 2ND COURT STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 33150 CITY-ST-ZIP 2. 4 CITY - S1 - ZIP DELETE 3.1 TITLE ☐ Change Addition MANUEL, JUSTIN NAME 3.2 NAME 10315 NORTHWEST 2ND COURT STREET ADDRESS 33 STREET ADDRESS MIAMI FL 33150 CITY-ST-ZIP 3.4. CITY-S1-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CiTY - ST - 7/P DELETE TITLE 5.1 TITLE Change Addition 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE ☐ Change ☐ Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 63 STREET ADDRESS CITY-ST-ZIP 6.4 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 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 0 address.

SIGNATURE: