

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

FILED
Jun 25 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000075272

1. Corporation Name
M.J.H., INC. DBA MikeWalden

Principal Place of Business
2700 N. AIA # 502
FT. PIERCE, FLA. 34949

Mailing Address

2. Principal Place of Business

21 AS ABOVE
Suite Apt # etc

22 City & State

23 Zip Country

24

2a. Mailing Address

26 AS ABOVE
Suite Apt # etc

27 City & State

28 Zip Country

29

30

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10-1-97

4. FTT Number

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property tax due June 30

Yes No

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

Mike Walden - Pres & CEO
2700 N. AIA # 502
FT. PIERCE, FLA. 34949

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.3508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered
office or registered agent location in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered
agent in accordance with the provisions of Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICER, DIRECTOR, OR SHAREHOLDER

1 NAME: Mike Walden - Pres & CEO
2 STREET ADDRESS: 2700 N. AIA # 502
3 CITY, ST, ZIP: FT. PIERCE, FLA. 34949

4 NAME: SAME PERSON
5 STREET ADDRESS: 2700 N. AIA # 502
6 CITY, ST, ZIP: FT. PIERCE, FLA. 34949

7 NAME: SAME PERSON
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43 NAME: SAME PERSON
44 STREET ADDRESS: 2700 N. AIA # 502
45 CITY, ST, ZIP: FT. PIERCE, FLA. 34949

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 NAME: [REDACTED]
2 STREET ADDRESS: [REDACTED]
3 CITY, ST, ZIP: [REDACTED]

4 NAME: [REDACTED]
5 STREET ADDRESS: [REDACTED]
6 CITY, ST, ZIP: [REDACTED]

7 NAME: [REDACTED]
8 STREET ADDRESS: [REDACTED]
9 CITY, ST, ZIP: [REDACTED]

10 NAME: [REDACTED]
11 STREET ADDRESS: [REDACTED]
12 CITY, ST, ZIP: [REDACTED]

13 NAME: [REDACTED]
14 STREET ADDRESS: [REDACTED]
15 CITY, ST, ZIP: [REDACTED]

16 NAME: [REDACTED]
17 STREET ADDRESS: [REDACTED]
18 CITY, ST, ZIP: [REDACTED]

19 NAME: [REDACTED]
20 STREET ADDRESS: [REDACTED]
21 CITY, ST, ZIP: [REDACTED]

22 NAME: [REDACTED]
23 STREET ADDRESS: [REDACTED]
24 CITY, ST, ZIP: [REDACTED]

25 NAME: [REDACTED]
26 STREET ADDRESS: [REDACTED]
27 CITY, ST, ZIP: [REDACTED]

28 NAME: [REDACTED]
29 STREET ADDRESS: [REDACTED]
30 CITY, ST, ZIP: [REDACTED]

29 NAME: [REDACTED]
30 STREET ADDRESS: [REDACTED]
31 CITY, ST, ZIP: [REDACTED]

30 NAME: [REDACTED]
31 STREET ADDRESS: [REDACTED]
32 CITY, ST, ZIP: [REDACTED]

31 NAME: [REDACTED]
32 STREET ADDRESS: [REDACTED]
33 CITY, ST, ZIP: [REDACTED]

32 NAME: [REDACTED]
33 STREET ADDRESS: [REDACTED]
34 CITY, ST, ZIP: [REDACTED]

33 NAME: [REDACTED]
34 STREET ADDRESS: [REDACTED]
35 CITY, ST, ZIP: [REDACTED]

SIGNATURE:

SIGNATURE AND TITLE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/97)