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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000025111

MJK-ENERGIE, INC.

Principal Place of Business	Mailing Address		
1505 SOUTHEAST 40TH STREET SUITE C CAPE CORAL FL 33904	1505 SOUTHEAST 40TH STREET SUITE C CAPE CORAL FL 33904		
2. Principal Place of Business	2a. Mailing Address		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		
City & State	City & State		
Zip Country	Zip Country		
25	20 30		

FILED Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90084 016 ***150.00



	e of Business	Mailing Address				
1505 SOUTHEAS	ST 40TH STREET	1505 SOUTHEAST 40TH STRE	ET			
SUITE C		SUITE C		DO NOT WRITE IN THIS SPACE		
CAPE CORAL F	L 33904	CAPE CORAL FL 33904				
				3. Date Incorporated or Qualifed		
				03/18/1998		
2. Principal Pt	lace of Business	2a. Mailing Address		4. FEI Number Applied For Not Applied For		
21		26				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired		
22		27				
City & State	e	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
23		28	Country			
Zip	Country	Zip	·	8. This corporation owes the current year Intangible Personal Property Tax.		
24	25	29 3	<u> </u>	Personal Property Tax.		
	9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name.					
AME	RILAWYER		7	H.S. Blair It HESOCIATE, INC.		
	ALMERIA AVENUE		82 Street	t Address (P.O. Box Number is Not Acceptable)		
	IAL GABLES FL 33134			1505 DE GUTH STIEL		
CON	AL CADLES PE 33 134		83	Salk C		
			84 City	2 (85 Zio-Code (
				ane Coral FL 133904		
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statutes	, the above-named	d corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered		
agent. I a	m familiar with, and accept the obligat	ions of, Section 607.0505, Florid	a Statutes.	~ ~~		
SIGNATURE	5 da Rocco	Vice the	-25	a required when reinstating) DATE		
	Signature, typed or printed name of registered agent					
12.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Clubria LH Rocco		
TITLE	Dein		I 1.1 TITLE			
	PSTD	- Detert	i	0.000		
NAME	LA ROCCO, ROBERT J	_	1.2 NAME	PIRECTOR UN STR SUITEL		
NAME STREET ADDRESS	LA ROCCO, ROBERT J 1505 SOUTHEAST 40TH STREE	_	1.2 NAME 1.3 STREET ADDRESS	PIRECTOR 40 STR, SUITEC		
	LA ROCCO, ROBERT J		1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	PIRECTOR SISOS SE 40 STR, SUITEC CAPE CORAL FL 33904		
STREET ADDRESS	LA ROCCO, ROBERT J 1505 SOUTHEAST 40TH STREE	_	1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	PIRECTOR 40 STR, SUITEC		
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14. I 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, with all other like empowered.