2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

FILED Aug 02, 2000 8:00 am Secretary of State DOCUMENT # P98000060479 1. Entity Name MDJ. INC. 08-02-2000 90150 008 ***150.00 Principal Place of Business Mailing Address 1859 STAIMFORD CIR. 1859 STAIMFORD CIR. WELLINGTON FL 33414 WELLINGTON FL 33414 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0861177 Not Applicable Zip Country Country \$8.75 Additional Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name ANGOTTI, MICHAEL A Street Address (P.O. Box Number is Not Acceptable) 1859 STAIMFORD CIR. **WELLINGTON FL 33414** Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Addition Change ☐ Delete TITLE TITLE ANN ANGOTTI ANGOTTI, MICHAEL A NAME NAME 1859 STAIMFOLD 1859 STAIMFORD CIR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP **WELLINGTON FL 33414** ☐ Addition □ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition □ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE TITLE NAMÉ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 report or supplemental 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 11 or Block 12 if

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July 17, 2000

Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, FL 32302-1500

To Whom It May Concern:

Recently MDJ Inc. Received a second form 2000 Uniform Business Report stating that the state of Florida did not receive the original report with the \$150.00 filing fee that should be filed by the end of April 2000.

I'm enclosing the second form along with a check in the amount of \$150.00 check number 134 for the year 2000.

I'm also enclosing a copy of the first form and a copy of the \$150.00 check, check number 126 that was sent in April 2000. I am also sending a copy of my bank statement that shows check number 126, dated 4-3-00 in the amount of \$150.00 made payable to The Department of the State has not been cashed to date.

Please except these copies as proof that the originals were sent in time, and must be lost in the mail.

If you have any questions, please contact me at work (800) 545-4968, or at home (561) 791-8923.

Sincerely,

Michael Angotti

President of MDJ Inc.

Mahad Afrigotte