2005 FOR PROFIT CORPORATION



DOCUMENT # P98000104215 1. Entity Name MJP PROPERTIES, INC. Principal Place of Business 223 W. GREGORY STREET PENSACOLA FL 32502 US Alling Address 223 W. GREGORY STREET PENSACOLA FL 32502 US Suite, Apt. #, etc.	DOCUMENT # P9800010421	_	i	ANNUAL REPORT (AR)					
Principal Place of Business 223 W. GREGORY STREET PENSACOLA FL 32502 US 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State Country S. Certificate of Status Desired Street Address of New Registered Agent PAIR, MATTHEW J 399 CREARY STREET PENSACOLA FL 32507 City Street Address (P.O. Box Number is Not Acceptable) PL Zip Code 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. I am familiar with, and acceptable of the obligations of registered agent. SIGNATURE	•					EH	ED	~,	
Principal Place of Business 223 W. GREGORY STREET PENSACOLA FL 32502 US 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) City & State City & State Country Zip Country Country S. Certificate of Status Desired Fe Required Fe Required 6. Name and Address of Current Registered Agent PAIR, MATTHEW J 399 CREARY STREET PENSACOLA FL 32507 City City City City City City City Cit	MJP PROPERTIES, INC.				•			•	
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City & State Country Country Country Country S. Certificate of Status Desired \$8.75 Additional Fee Required Fee Required Fee Required Name Street Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and acceptable obligations of registered agent. SIGNATURE SIGNATURE	2. Principal Place of Business	3. Mailing Address							
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PAIR, MATTHEW J 399 CREARY STREET PENSACOLA FL 32507 City FL Zip Code 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE	Zip Country	Zip	Country		5. Certificate	of Status Desired			
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399 CREARY STREET PENSACOLA FL 32507 City FL Zip Code 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE	DAID MANTILENAL I		Name						
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		and title if applicable. (NOTE	E: Registered Agent signal	nte tednited	when reinstating)	·	DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State 9. Election Campaign Financing Trust Fund Contribution. Added to Fees	After May 1, 2005 Fee Will Be \$550.00					1			•
10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	10. OFFICERS AND	DIRECTORS	11.		ADDITIONS	/CHANGES TO C	FFICERS AND DI	RECTOR	S IN 11
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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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. Matthew J. Pair

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/15/05

Daytime Phone #