

<b>DOCUMENT # P990000002745</b>			
<b>1. Entity Name</b> <div style="margin-top: 10px; font-size: 1.2em; font-weight: bold;">M J G BUILDERS INC.</div>			
<b>Principal Place of Business</b>  7210 RED ROAD SUITE 205 SOUTH MIAMI FL 33143		<b>Mailing Address</b>  7210 RED ROAD SUITE 205 SOUTH MIAMI FL 33143-5321	
<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
<b>6. Name and Address of Current Registered Agent</b>			
<b>GERRITS, MOCHAEAL J</b> <b>7210 RED ROAD</b> <b>SUITE 205</b> <b>SOUTH MIAMI FL 33143</b>			Name
			Street Address ( )
			City
<b>8. The above named entity submits this statement for the purpose of changing its registered office or register</b>			
<b>SIGNATURE</b> _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required)</small>			
<b>9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.</b> (See criteria on back) <input type="checkbox"/>		<b>FILE NOW!!! FEE IS \$150.00</b> <b>After MAY 1, 2000 Fee will be \$550.00</b> <b>Make Check Payable to Department of Sta</b>	
<b>11. OFFICERS AND DIRECTORS</b>		<b>12.</b>	
TITLE	D <input type="checkbox"/> Delete		TITLE
NAME	GERRITS, MICHAEL J		NAME
STREET ADDRESS	7210 RED ROAD		STREET ADDRESS
CITY-ST-ZIP	SOUTH MIAMI FL 33143		CITY-ST-ZIP
TITLE	<input type="checkbox"/> Delete		TITLE
NAME			NAME
STREET ADDRESS			STREET ADDRESS
CITY-ST-ZIP			CITY-ST-ZIP
TITLE	<input type="checkbox"/> Delete		TITLE
NAME			NAME
STREET ADDRESS			STREET ADDRESS
CITY-ST-ZIP			CITY-ST-ZIP
TITLE	<input type="checkbox"/> Delete		TITLE
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STREET ADDRESS			STREET ADDRESS
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TITLE	<input type="checkbox"/> Delete		TITLE
NAME			NAME
STREET ADDRESS			STREET ADDRESS
CITY-ST-ZIP			CITY-ST-ZIP
TITLE	<input type="checkbox"/> Delete		TITLE
NAME			NAME
STREET ADDRESS			STREET ADDRESS
CITY-ST-ZIP			CITY-ST-ZIP

Daytime Phone #

CR2E034 (9/99)