

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**AMENDED**

**PROFIT CORPORATION ANNUAL REPORT 1996**



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

**DOCUMENT # 208858 (1)**  
1. Corporation Name

**THE MINDORE HOLDING CORPORATION**

Principal Place of Business: 15700 NW 18th AVE, opa Locka Fl 33054  
Mailing Address: 15700 NW 18th AVE, Opa Locka Fl 33054

2. Principal Place of Business  
21 Suite, Apt. #, etc.  
22 City & State  
23 Zip  
24 Country

3. Date Incorporated or Qualified: 01/08/1958  
3a. Date of Last Report: 03/25/1996  
4. FL Number: 59-6076852  
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 has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

9. Name and Address of Current Registered Agent  
BYRANT, GUILDA  
812 NW 19th TERRACE  
FT. LAUDERDALE, FL 33311

10. Name and Address of New Registered Agent  
81 Name: EARL G. MIZELL  
82 Street Address: 15700 NW 18th AVENUE  
83 City: OPA LOCKA, FL  
84 Zip Code: 33054

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  
SIGNATURE: *Earl G. Mizell* Earl G. Mizell, Secretary 05/24/1996

12. OFFICERS AND DIRECTORS

TITLE PD	PAPPY, ETHEL	<input type="checkbox"/> DELETE
NAME	478EVANSTON CIRCLE	
STREET ADDRESS	FT. LAUDERDALE FL	
CITY-ST-ZIP		
TITLE SD	MIZELL, EARL G.	<input type="checkbox"/> DELETE
NAME	15700 NW 18th AVENUE	
STREET ADDRESS	OPA LOCKA, FL	
CITY-ST-ZIP		
TITLE D	EDISON, ERVEAN	<input type="checkbox"/> DELETE
NAME	10 NW 7th AVENUE	
STREET ADDRESS	DANIA, FL	
CITY-ST-ZIP		
TITLE VPD	ANDREWS, JACQUELYN	<input type="checkbox"/> DELETE
NAME	2 SW 7th AVENUE	
STREET ADDRESS	DANIA, FL	
CITY-ST-ZIP		
TITLE TD	PEEK, BERNICE	<input type="checkbox"/> DELETE
NAME	3 SW 7th AVENUE	
STREET ADDRESS	DANIA, FL	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

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\*\*\*61.25 61.50  
30 yr

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.  
SIGNATURE: *Earl G. Mizell* EARL G. MIZELL, SECRETARY 05/24/96 305 6216625

CR2E034 (12/95)