

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Apr 21 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F09495 (5)
1. Corporation Name
MACHO PRODUCTS, INC.

Principal Place of Business
10045-102ND TERRACE
SEBASTIAN FL 32958

Mailing Address
10045-102ND TERRACE
SEBASTIAN FL 32958-7831



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/17/1980		3a. Date of Last Report 01/24/1996	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-2069844		Applied For Not Applicable	
22	City & State	27	City & State	5. Certificate of Status Desired XX		\$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		☐ Yes ☐ No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
EVANS, JOHN G 11155 ROSELAND RD, UNIT 1 SEBASTIAN FL 32958				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				FL 85 Zip Code			

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

Signature, typed or printed name of registered agent, and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	VD	☐ DELETE	1.1 TITLE	DC	☐ Change	☒ Addition	
NAME	ABLEMAN, MICHAEL R.		1.2 NAME	Amir K. Shadab			
STREET ADDRESS	11155 ROSELAND ROAD		1.3 STREET ADDRESS	Post Office Box 3697 (n/a)			
CITY-ST-ZIP	SEBASTIAN FL		1.4 CITY-ST-ZIP	Vero Beach FL 32964			
TITLE	TD	☒ DELETE	2.1 TITLE	D	☐ Change	☒ Addition	
NAME	PARKER, CLIVE		2.2 NAME	Maria Soranno			
STREET ADDRESS	11155 ROSELAND ROAD		2.3 STREET ADDRESS	9101 Shore Road			
CITY-ST-ZIP	SEBASTIAN FL		2.4 CITY-ST-ZIP	Brooklyn NY 11209			
TITLE	CSD	☐ DELETE	3.1 TITLE	DP	☒ Change	☐ Addition	
NAME	EVANS, JOHN G.		3.2 NAME	John G. Evans			
STREET ADDRESS	11155 ROSELAND RD., UNIT 1		3.3 STREET ADDRESS	11155 Roseland Rd, Unit 1			
CITY-ST-ZIP	SEBASTIAN FL		3.4 CITY-ST-ZIP	Sebastian FL 32958			
TITLE	VD	☒ DELETE	4.1 TITLE	VDS	☒ Change	☐ Addition	
NAME	REINHALTER, ROBERT G.		4.2 NAME	Michael R. Ableman			
STREET ADDRESS	11155 ROSELAND ROAD		4.3 STREET ADDRESS	11155 Roseland Rd			
CITY-ST-ZIP	SEBASTIAN FL		4.4 CITY-ST-ZIP	Sebastian FL 32958			
TITLE	PD	☒ DELETE	5.1 TITLE		☐ Change	☐ Addition	
NAME	ALAN MORRIS		5.2 NAME				
STREET ADDRESS	701 LAKE DRIVE		5.3 STREET ADDRESS				
CITY-ST-ZIP	SEBASTIAN FL		5.4 CITY-ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE		☐ Change	☐ Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP			6.4 CITY-ST-ZIP				

14. I do 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, or on an attachment with an address.

SIGNATURE:

March 25, 1997

561-388-9892

CR2E034 (9/96)