

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

FILED

Feb 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		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**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/17/1980	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-2069844	
22	City & State	27	City & State	5. Certificate of Status Desired ☒ \$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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent EVANS, JOHN G 11155 ROSELAND RD, UNIT 1 SEBASTIAN FL 32958		10. Name and Address of New Registered Agent	
		81 Name Gail Melnick	
		82 Street Address (P.O. Box Number is Not Acceptable) 10045 102nd Terrace	
		83	
		84 City Sebastian	85 Zip Code FL 32958

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, 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 obligation of, Section 607.0505, Florida Statutes.

SIGNATURE *Gail Melnick* 2/5/98
Signature of person named in Block 10, or 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	VS ☐ Change ☒ Addition
NAME	ABLEMAN, MICHAEL R.	1.2 NAME	Gail Melnick
STREET ADDRESS	11155 ROSELAND ROAD	1.3 STREET ADDRESS	11156 Hotchkiss Drive
CITY-ST-ZIP	SEBASTIAN FL	1.4 CITY-ST-ZIP	Sebastian FL 32958
TITLE	DC ☐ DELETE	2.1 TITLE	DT ☐ Change ☒ Addition
NAME	SHADAB, AMIR K.	2.2 NAME	Clive R. Parker
STREET ADDRESS	PO BOX 3697 N/A	2.3 STREET ADDRESS	11155 Roseland Road, #8
CITY-ST-ZIP	VERO BCH FL	2.4 CITY-ST-ZIP	Sebastian FL 32958
TITLE	DP ☒ DELETE	3.1 TITLE	DCP ☒ Change ☐ Addition
NAME	EVANS, JOHN G.	3.2 NAME	Amir K. Shadab
STREET ADDRESS	11155 ROSELAND RD., UNIT 1	3.3 STREET ADDRESS	PO Box 3697 N/A
CITY-ST-ZIP	SEBASTIAN FL	3.4 CITY-ST-ZIP	Vero Beach FL 32963
TITLE	VDS ☒ DELETE	4.1 TITLE	D ☐ Change ☒ Addition
NAME	ABLEMAN, MICHAEL R.	4.2 NAME	Bruno Carioti
STREET ADDRESS	11155 ROSELAND RD	4.3 STREET ADDRESS	4238 Embassy Park Drive, NW
CITY-ST-ZIP	SEBASTIAN FL	4.4 CITY-ST-ZIP	Washington, DC 20016
TITLE	D ☐ DELETE	5.1 TITLE	
NAME	SORANNO, MARIA	5.2 NAME	
STREET ADDRESS	9101 SHORE RD	5.3 STREET ADDRESS	
CITY-ST-ZIP	BROOKLYN NY	5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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: *Amie K. Shadab* 1/6/98
Signature and Type and Printed Name of Signing Officer or Director Date

CR2E034 (10/97)