

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
Sep 02 1997 8:00am
Secretary of State

DOCUMENT # G06316 (5)
1. Corporation Name
M.I.M.E., INC.



Principal Place of Business
% ACME GAS CORP.
1491 N.E. 130 STREET
N. MIAMI FL 33181

Mailing Address
% ACME GAS CORP.
1491 N.E. 130 STREET
N. MIAMI FL 33181

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 11585 NE 22 DR
NO MIAMI FL 33181
Suite, Apt. #, etc.
22
City & State
23 NO MIAMI, FL
Zip 33181 Country USA
24 25 29 30 33181 USA

2a. Mailing Address
26 11585 NE 22 DR
Suite, Apt. #, etc.
27
City & State
28 NO MIAMI, FLA
Zip 33181 Country USA
29 30 33181 USA

3. Date Incorporated or Qualified 10/25/1982
3a. Date of Last Report 06/21/1996
4. FEI Number 59-1709092
Applied For Not Applicable
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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

FRANKLIN, IRWIN
% ACME GAS CORP.
1491 N.E. 130 STREET
N. MIAMI FL 33181

10. Name and Address of New Registered Agent

81 Name FRANKLIN, IRWIN
82 Street Address (P.O. Box Number is Not Acceptable) 11585 NE 22 DR
83
84 City NO MIAMI FL 85 Zip Code 33181

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 IRWIN FRANKLIN, SECY 8/25/97
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	PD	1.1 TITLE	
NAME	COHEN, MERRILL	1.2 NAME	
STREET ADDRESS	1491 N.E. 130TH STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	N. MIAMI FL 33181	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	
NAME	GREGG, MORTON A.	2.2 NAME	
STREET ADDRESS	1491 N.E. 130TH STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	N. MIAMI FL 33181	2.4 CITY-ST-ZIP	
TITLE	STD	3.1 TITLE	
NAME	FRANKLIN, IRWIN	3.2 NAME	IRWIN FRANKLIN
STREET ADDRESS	1491 N.E. 130TH STREET	3.3 STREET ADDRESS	11585 NE 22 DR
CITY-ST-ZIP	N. MIAMI FL 33181	3.4 CITY-ST-ZIP	N. MIAMI FL 33181
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
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 if changed, or on an attachment with an address.

CR2E034 (4/97)