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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEFARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90067 030 ***150.00

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DOCUMENT #	H52832
4. Corneration Name	110-00-

MULHALL INCORPORATED

Principal Flace of Business 7811 NW 68 AVE. Mailing Address

7811 NW 68 AVE. 7811 NW 68 AVE TAMARAC FL 33321 TAMARAC FL 33321 DO NOT WRITE IN THIS SPACE 3. Date ncorporated or Qualifed 04/18/1985 Applied For 4. FEI Number 2. Princip al Place of Business 2a. Mailing Address 59-2518366 Not Applicable 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees 28 Trust Fund Contribution 23 Country Zip Country Zip 8. This corporation owes the current year Intangible Personal Property Tax. 25 29 30 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent MULHALL, JOHN E. 82 Street Address (P.O. Box Number is Not Acceptable) 7811 NW 68 AVE. TAMARAC FL 33319 83 84 85 Zip Code City Fil 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 a ccept the obligations of, Section 607.0505, Florida Statutes. SIGNATU RE Signature, typed or printed name of registered ager t and title if applicable (NO FE: Registered Agent signature re-uired when reinstating)

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change Addition DELETE TITLE PD 1.1 TITLE MULHALL, JOHN E. 1.2 NAME NAME 7811 NW 68 AVE. 1.3 STREET ADDRESS STREET ADDRESS TAMARAC FL CITY-ST-ZIP 1.4 CITY-ST-ZIP Addition ☐ DELETE ☐ Change 2.1 TITLE STD TITLE MULHALL, DELORES C 2.2 NAME NAME 7811 NW 68 AVE. 2.3 STREET ADDRESS STREET ADDRESS TAMARAC FL 2.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 41 TITLE TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE ☐ Change ☐ Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE 6.1 TITLE Change TITLE 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 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 pertify 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, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICIR OF DIRECTOR

4-22-99 954 721 **592**Daytime Phone #

CR2E034 (11/98)