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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **K29203**

1. Corporation Name

MI-DEAR CORP.

,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,									
Principal Place of Business Mailing Address								=12,, 2,2,,	
150 S. PINE ISLAND ROAD 150 S. PINE ISLAND ROAD									
SUITE 110 SUITE 110						DO NOT WRITE IN THIS SPACE			
PLANTATION FL 33324 US PLANTATION FL 33324 US						3. Date Incorporated or Qualified			
US		US				07/21/1988			}
Principal Place of Business 2a. Mailing Address						4. FEI Number			pplied For
	ace of Business				65-0073474		1-1-	ot Applicable	
21 Suite Art	#	Suite, Apt. #, etc.			03 00/34/4			Additional	
Suite, Apt.	#, etc.	Suite, Apr. #, otc.			5. Certifcate of Status Desired			equired	
City & State		City & State			6. Election Campaign Financing		\$5.00	May Be	
	7	28				Trust Fund Contribution			to Fees
Zip	Country	Zip Country				8. This corporation owes the curr	ent vear Inta		
24	25	29 30	າ ້			Personal Property Tax.		☐Yes	□No
	9. Name and Address of Current		<u> </u>			10. Name and Address of New F	legistered A	gent	
<u>.</u>	S. Hallis alla Adaress S. Gallen.		81	Nam	18				
Steven Katz, ESQ									
515		82	82 Street Address (P.O. Box Number is Not Acceptable)						
	AUDERDALE FL 33301		83	-					
							<u> </u>		
			84	City			FL	85 Zip	Code .
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligation Signature, typed or printed name of registered agent	of Florida, Such change was autrions of, Section 607.0505, Florid	a Statutes	the co	rporatioi	when reinstating)	DATE	THE REST	59,510,704
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OF	FICERS AN	DIRECT	
TITLE	DV	☐ DELETE	1.1 TITLE		-	-		Change	☐ Addition
NAME	MICHELSON, ROGER		1.2 NAME		1				
STREET ADDRESS	150 S. PINE ISLAND ROAD, SU	ITE 110	1.3 STREE	TADDRE	ss				ľ
CITY-ST-ZIP	PLANTATION FL 33324		1.4 CITY-ST-ZIP						
TITLE	OPT □ DELETE		2.1 TITLE					Change	☐ Addition
NAME .	MICHELSON, EDWARD		2.2 NAME						
STREET ADDRESS	150 S. PINE ISLAND ROAD, SU	JITE 110	2.3 STREE	T ADDRE	ss				
CITY-ST-ZIP	PLANTATION FL 33324		.2.4 CITY ₂ \$	ST: ZIP			·		
TITLE	DS	☐ DELETE	3.1 TITLE	-				Change	Addition
NAME	MICHELSON, BRUCE		3.2 NAME		ļ				\ \
STREET ADDRESS	150 S. PINE ISLAND ROAD, SU	ITE 110	3.3 STREE	T ADORE	ss				
CITY-ST-ZIP	PLANTATION FL 33324		3.4. CITY-5	ST-ZIP	-				
TITLE		☐ DELETE	4.1 TITLE					Change	☐ Addition
NAME			4. 2 NAME		l l				1
STREET ADDRESS			4.3 STREE	TADDRE	ss		•		1
CITY-ST-ZIP			4.4 CITY-S						
TITLE		☐ DELETE	5.1 TITLE		-			Change	☐ Addition
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREE	TADDRE	ss				ļ
CITY-ST-ZIP			5.4 CITY- S						
TITLE		☐ DELETE	6.1 TITLE					Change	☐ Addition
NAME			6.2 NAME						
CTDEET ADDRESS			6.3 STREE	T ADDRE	ss				

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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

03/23/99 (954)424 - 7371

FILED

Mar 24, 1999 8:00 am Secretary of State

03-24-1999 90063 022 ***150.00