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

**PROFIT CORPORATION** ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT** # L96751

(7)

MIT PRODUCTS & SERVICE, INC.

**MELISSA B MOREL** 

12605 N.W. 7TH ST

MOREL, JUAN J.

12605 NW 7TH STREET

MIAMI FL

MIAMI FL

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

FILED
Mar 20 1998 8:00am
Secretary of State

☐ Change

Change

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\_\_\_ Addition

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Principal Place of Business Mailing Address						T SABOLONI DED EDITED OFFICE POLON STEEL DESPE DESTE DES		
6555 N W 36 STE 301 MIAMI FL 33		STE 301 MIAMI FL 3	MIAMI FL 33166			DO NOT WRITE IN THIS SPACE		
US		U\$				3. Date Incorporated or Qualified . 08/27/1990		
2. Principal F	Place of Business	2a. Mailing A	2a. Mailing Address 26			4. FEI Number Applied For 65-02 129 12 Not Applicable		
Suite, Apt.	#, etc.	Suite, Ap	Suite, Apt. #, etc.			Certificate of Status Desired		
City & Stat	е	City & Ste	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip 24	Country 25	Ζφ <b>29</b>	30	untry		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
						10. Name and Address of New Registered Agent		
Yelissa Castello Fernandez				81	Name			
12605 N.W. 7TH ST MIAMI FL 33182				82				
				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 reinstative.)  12. OFFICERS AND DIRECTORS  13. ADDITI						e required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PTS DELETE			ITLE		Change Addition		
NAME	YELISSA CASTELLO FERNANDEZ			NAME		— · · · — · · ·		
STREET ADDRESS	JOSEP HIM WILLOW				ET ADDRESS			
CITY-ST-ZIP	Minn Fr			CITY-S				
TITLE				ITLE		Change Addition		
NAME	RAFAEL A MOREL		2.21	2 NAME				
STREET ADDRESS	REET ADDRESS 12605 N.W. 7TH ST			2.3 STREET ADDRESS				
CITY-ST-ZIP	CITY-ST-ZIP MIAMI FL			2.4 CITY-ST-ZIP				

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

3.4. CITY - ST - ZIP

3.1 TITLE

3.2 NAME

4.1 TITLE

4.2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

DELETE

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.

YELISSA CASTEllo Fernandey