SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P97000056921 (4)

MICHAELDAN CORP.

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|------|------------------------|
| 751 | WASHINGTON AVE |
| RICA | III OCADIL CLI SSISS |

FILED

Aug 19 1998 8:00am

Secretary of State

| | | | | |
|----------------|--|---------------------------------|--------------------------------|---|
| Principal Plac | e of Business | Mailing Address | | |
| 751 WASHINGT | | • - | | |
| MIAMI BEACH | FL 33139 | . 3 | | DO NOT WRITE IN THIS SPACE |
| | | | | 3. Date Incorporated or Qualified |
| | | | | 06/27/1997 |
| 2. Principal P | Place of Business | 2a. Mailing Address | | 4. FEI Number Applied For |
| 21 | | 26 1440 Reel | | 65077729 Not Applicable |
| Suite, Apt. | #. etc | Suite, Apt. #, etc. | | \$8.75 Additional |
| 22 | | 27 Montreal | Carpha | 1 5. Certificate of Status Desired L3 |
| City & Stat | le | City & State | | 6. Election Campaign Financing \$5.00 May Be |
| 23 | | 28 H3A 1583 | | Trust Fund Contribution Added to Fees |
| Zip | Country | Zip | Country | 8. This corporation owes or has paid the current year Intangible |
| 24 | 25 | 29 | OANAD | Personal Property Tax due June 30. Yes X No |
| <u> </u> | 9. Name and Address of Curren | t Registered Agent | | 10. Name and Address of New Registered Agent |
| COF | PORATE ACCESS, INC. | | 81 Name | |
| | B-D THOMASVILLE RD | | 82 Street A | Address (P.O. Box Number is Not Acceptable) |
| | JNT VERNON SQUARE | | 02 Sifeet A | Address (P.O. Box Number is Not Acceptable) |
| | LAHASSEE FL 32303 | | 83 | |
| | | | | |
| | | | 84 City | FL 85 Zip Code |
| office or | registered agent, or both, in the State am familiar with, and accept the obliga | of Florida. Such change was au | thorized by the corpo | orporation submits this statement for the purpose of changing its registered pration's board of directors. I hereby accept the appointment as registered |
| SIGNATURE | Signature, typed or printed name of registered agen | t and title if applicable (NOT. | E: Registered Agent signatur | e required when reinstaling) DATE |
| 12. | | D DIRECTORS | I 13. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE | D | DELETE | 1.1 TITLE | Change Addition |
| NAME | BENSOUSSAN, MICHEL | | 1.2 NAME | |
| STREET ADDRESS | 751 WASHINGTON AVE | | 1.3 STREET ADDRESS | |
| CITY-ST-ZIP | MIAMI BEACH FL 33139 | | 1.4 CITY-ST-ZIP | |
| TITLE | D | DELETE | 2.1 TITLE | Change Addition |
| NAME | BENSOUSSAN, DANY | [_] DELETE | 2.2 NAME | Unange Auditori |
| STREET ADDRESS | 751 WASHINGTON AVE | | 23 STREET ADDRESS | |
| CITY-ST-ZIP | MIAMI BEACH FL 33139 | | 2.4 CITY-ST-ZIP | |
| TITLE | WW 411 DD 1011 1 2 00 100 | DELETE | 3.1 TITLE | Change Addition |
| NAME | | □ nere ie | 3.2 NAME | L_1 Change L_1 Addition |
| | | | 3.2 NAME 3.3 STREET ADDRESS | |
| STREET ADDRESS | | | | |
| CITY-ST-ZIP | | Пределе | 3.4 CITY-ST-ZIP 4.1 TiTLE | |
| TITLE | | L_ DELETE | | Change Addition |
| NAME | | | 4.2 NAME | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | | | 4.4 CITY-ST-ZiP | |
| TITLE | | DELETE | 5.1 TITLE | Change Addition |
| NAME | | | 5.2 NAME | |
| STREET ADDRESS | | | 53 STREET ADDRESS | |
| CITY-ST-ZIP | | | 5.4 CITY-ST-ZIP | |
| TITLE | _ | DELETE | 6.1 TITLE | Change Addition |
| NAME | | 1 | 6.2 NAME | |
| STREET ADDRESS | Athuria | . 1 | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | !!hud[]</td <td></td> <td>6.4 CITY-ST-ZIP</td> <td></td> | | 6.4 CITY-ST-ZIP | |

14. I hereby certify that the informal indicated on this annual report an officer or director of the contractor of the c filing does not qualify for the exemption stated in section 119.07(3)(i), Florida Statutes. I further certify that the information ual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am er or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears

Ollingover Percencer 28, 798, 641