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Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90028 046 ***158.75

PROFIT CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000006450

1. Corporation Name
MATHIS MANAGEMENT GROUP, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business
2843 S. BAYSHORE DRIVE
D-9
MIAMI FL 33133

Mailing Address
2843 S. BAYSHORE DRIVE
D-9
MIAMI FL 33133

3. Date Incorporated or Qualified
01/21/1998

2. Principal Place of Business
21 Suite, Apt. #, etc.

2a. Mailing Address
26 Suite, Apt. #, etc.

4. FEI Number
65-0806038

Applied For
Not Applicable

22 City & State
23 Zip Country

27 City & State
28 Zip Country

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

24 Zip Country 25 Zip Country

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent

MATHIS, BUSTER
2843 S. BAYSHORE DRIVE
D-9
MIAMI FL 33133

10. Name and Address of New Registered Agent

81 Name
MATHIS, JR., BUSTER
82 Street Address (P.O. Box Number is Not Acceptable)
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 provisions of Section 607.0505, Florida Statutes.

SIGNATURE *Buster Mathis, Jr.* BUSTER MATHIS, JR. 04/24/99
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Table with 2 columns: OFFICERS AND DIRECTORS (12), ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (13). Rows include fields for Title, Name, Street Address, City-ST-ZIP, and checkboxes for Delete, Change, or Addition.

Table with 2 columns: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (13). Rows include fields for Title, Name, Street Address, City-ST-ZIP, and checkboxes for Change or Addition.

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.

SIGNATURE: *Buster Mathis, Jr.* BUSTER MATHIS, JR. - PRESIDENT 04/24/99
Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/98)