


**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.**  
 AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

0127100

<b>PROFIT CORPORATION ANNUAL REPORT 1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
<b>DOCUMENT # P98000019523</b> 1. Corporation Name <b>M S LUBRICATION, INC.</b>		

FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS  
 99 AUG -2 AM 11:11



Principal Place of Business <b>2700 N SR 7, BAY B LAUDERDALE LAKES FL 33313</b>	Mailing Address <b>2700 N SR 7, BAY B LAUDERDALE LAKES FL 33313</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>02/27/1998</b>	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number <b>65-0816259</b>		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
24 Country	29 Country	8. This corporation owes the current year Intangible Personal Property.		<input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>SAYEGH, RICHARD 2700 N SR 7, BAY B LAUDERDALE LAKES FL 33313</b>				10. Name and Address of New Registered Agent			
81 Name				82 Street Address (P.O. Box Number is Not Acceptable)			
83				<b>600002948826--3</b>			
84 City				<b>-08/03/99--01041--024</b> <b>***150.00</b> <b>***150.00</b> <b>FL</b>			

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	President	<input type="checkbox"/> DELETE		1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	Richard Sayegh			1.2 NAME			
STREET ADDRESS	10844 La Salinas Cr.			1.3 STREET ADDRESS			
CITY-ST-ZIP	Boca Raton FL 33428			1.4 CITY-ST-ZIP			
TITLE	Vice President	<input type="checkbox"/> DELETE		2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	Paula Sayegh			2.2 NAME			
STREET ADDRESS	10844 La Salinas Cr.			2.3 STREET ADDRESS			
CITY-ST-ZIP	Boca Raton, FL 33428			2.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET ADDRESS			
CITY-ST-ZIP				3.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 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.

SIGNATURE: Richard Sayegh Date: 7/26/99 954-677-0200  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (5/99)

July 26<sup>th</sup>, 1999

Mr. Sean Toner  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

RE: P98000019523

Dear Mr. Toner:

M S Lubrication, Inc. was incorporated in February of 1998 and commenced business in March of 1998.

The first corporate annual report was issued for 1999. M S Lubrication did not receive this report. It could have very well been received at another bay in the center and just not dropped off to us, or just lost in the mail. We recently received a 2<sup>nd</sup> Notice for filing the annual report along with a filing fee of \$500.00.

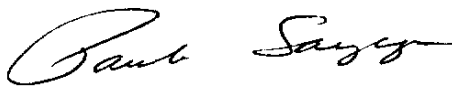
Since it is our first year of filing we ask that the original fee of \$150.00 be reinstated. It being our first year in business, we would certainly want to keep expenses down and not have to incur additional expenses and would have paid the annual fee on time if we received it.

Enclosed is our check in the amount of \$150.00. Please respond to this request in writing to the following address:

M S Lubrication, Inc.  
2700 N. State Road 7, Bay B  
Lauderdale Lakes, Florida 33313

Sincerely,

M S LUBRICATION, INC.



Paula Sayegh  
Vice President