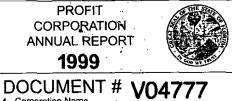
## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999

1. Corporation Name



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **FILED** May 01, 1999 8:00 am Secretary of State 05-01-1999 90077 020 \*\*\*150.00

MAINGA	TE HILLS, INC.								
Principal Plan	e of Business	Mailing Address	·			L 16011 VI[MI] 681]] WIDH (681] 180		11 018H 418H	
520 BRICKELL KEY DRIVE 520 BRICKELL KEY DRIVE							•		
SUITE 0-305 SUITE 0-305									
MIAMI FL 33131 MIAMI FL 33131						DO NOT WRIT	E IN THIS	SPACE	
	•					3. Date Incorporated or Qualifed			
						01/08/1992		<del></del>	
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		<b>├</b> ─┼	Applied For
1 26						65-0311614			lot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certifcate of Status Desired			Additional Required
2		27				<del></del>			_ <del></del>
City & State City & State						6. Election Campaign Financing			May Be
3		28				Trust Fund Contribution	<del>`</del>		to Fees
Zip	Country	Zip	Coun	ntry		8. This corporation owes the curre	ent year Inta	ingible Yes	□No
4	25		30		<del> </del>	Personal Property Tax.  10. Name and Address of New R	agistared /		
	9. Name and Address of Currer	nt Registered Agent	+	81	Name	10. Name and Address of New N	edizielen v	ryont	_ <del></del>
CDC	EMAN CTEDHEN A ECOLUDE		J	<b>°</b> '	Name	* *			
Freeman, Stephen A. Esquire Freeman, Butterman & Haber				82	Street Addre	ess (P.O. Box Number is Not Accepta	ble)		
	BRICKELL KEY DRIVE STE 0-30	ıs	ļ						
		,		83			•		
MIAMI FL 33131			f	84	City			85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes					·	· · · · · · · · · · · · · · · · · · ·	<u>FL</u>		
12.	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE: ND DIRECTORS	Registered A	Agent s	signature required	d when reinstating)  ADDITIONS/CHANGES TO OF	DATE ICERS AN	D DIRECT	ORS IN 12
TITLE	PSD			1.1 TITLE				Change	
NAME	BERNACHIO, JOAO ALBERTO		. 1.2 NAME						
STREET ADDRESS	TOO DESCRIPTION DE		1.3 STF	REETA	DORESS		,	•	
CITY-ST-ZIP	MIAMI FL		1.4 CIT		ļ	. •	,		
TITLE	S DELETE		2.1 TITLE					Change	Addition
NAME	FREEMAN, STEPHEN A.		2.2 NAME					,	
STREET ADDRESS	FAR DELOVED MEN DE OFF A DOF			2.3 STREET ADDRESS		•			
	MIAMI FL	0 000	2. 4 CIT		1	*			
CITY-ST-ZIP TITLE	marunt 1 L	☐ DELETE	3.1 TiTI					Change	e
NAME			3.2 NA	ME					
STREET ADDRESS			•		DDRESS		•		
CITY-ST-ZIP	1		3.4. CIT						
TITLE	<u> </u>		4.1 TITI					Chang	e Addition
NAME .		☐ DELETE			ŀ				
STREET ADDRESS		☐ DELETE	4.2 NA	ME					
	<b>~1</b>	□ OELETE			ADDRESS				
CITY-ST-ZIP TITLE	,	DELETE	4.3 STF	REET A	ADDRESS ZIP		•		
NAME		☐ DELETE		REET A	1			☐ Chang	e ∏ Addition
INVIC			4.3 STF 4.4 CIT	REET A Y-ST-	1			☐ Chang	e ∏ Addition
CTREET ADVOCCO			4.3 STF 4.4 CIT 5.1 TITI 5.2 NAI	REET A TY-ST- LE ME	1			☐ Chang	e ∏ Addition
STREET ADDRESS	3		4.3 STF 4.4 CIT 5.1 TITI 5.2 NAI	REET A TY-ST- LE ME REET A	ZIP ADDRESS	·	· ·	☐ Chang	a Addition
CITY-ST-ZIP	3	☐ DELETE	4.3 STF 4.4 CIT 5.1 TITI 5.2 NAI 5.3 STF	REET A Y-ST- LE ME REET A Y-ST-	ZIP ADDRESS			☐ Chang	
CITY-ST-ZIP	3		4.3 STF 4.4 CIT 5.1 TITI 5.2 NAI 5.3 STF 5.4 CIT	REET A Y-ST- LE ME REET A Y-ST- LE	ZIP ADDRESS				
CITY-ST-ZIP		☐ DELETE	4.3 STF 4.4 CIT 5.1 TITH 5.2 NAV 5.3 STF 5.4 CIT 6.1 TITH 6.2 NAV	REET A Y-ST- LE ME REET A Y-ST- LE ME	ZIP ADDRESS				

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:

3/26/99

(305) 374-3800