

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



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

FILED  
Apr 16, 1999 8:00 am  
Secretary of State

04-16-1999 90049 022 \*\*\*158.75

DOCUMENT # P98000022432

1. Corporation Name

MINORITY ACQUISITION CORPORATION

Principal Place of Business

14310 N.W. 12TH AVENUE  
MIAMI FL 33168

Mailing Address

14310 N.W. 12TH AVENUE  
MIAMI FL 33168

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/10/1998

4. FEI Number

65-0845647

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☐

Yes

☒

No

2. Principal Place of Business

21 245 NW 8th Street  
Suite, Apt. #, etc.

2a. Mailing Address

26 245 NW 8th Street  
Suite, Apt. #, etc.

City & State

23 Miami, FL Country

24 33136

25

City & State

28 Miami, FL Country

29 33136

30

9. Name and Address of Current Registered Agent

MAJOR, LLOYD H  
14310 N.W. 12TH AVENUE  
MIAMI FL 33168

10. Name and Address of New Registered Agent

81 Name

WILLIAM G. MAUZY

82 Street Address (P.O. Box Number is Not Acceptable)

245 NW 8th Street

83

84 City

Miami

FL

85 Zip Code  
33136

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 WILLIAM G. MAUZY

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

April 13, 1999

DATE

12. OFFICERS AND DIRECTORS

TITLE D  
NAME MAJOR, HAROLD  
STREET ADDRESS 14310 N.W. 12TH AVENUE  
CITY-ST-ZIP MIAMI FL 33168  
☐ DELETE  
XX

TITLE D  
NAME JEFFERSON, OLLIE  
STREET ADDRESS 14310 N.W. 12TH AVENUE  
CITY-ST-ZIP MIAMI FL 33168  
☐ DELETE  
XX

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/D  
1.2 NAME MAUZY, WILLIAM  
1.3 STREET ADDRESS 245 NW 8th Street  
1.4 CITY-ST-ZIP Miami, FL 33136  
☒ Change ☐ Addition

2.1 TITLE V/D  
2.2 NAME COOK, DOUGLAS  
2.3 STREET ADDRESS 5946 NW 12th Ave  
2.4 CITY-ST-ZIP Miami, FL 33127  
☒ Change ☐ Addition

3.1 TITLE T/D  
3.2 NAME WHITE, JOHN  
3.3 STREET ADDRESS 245 NW 8TH Street  
3.4 CITY-ST-ZIP Miami, FL 33136  
☒ Change ☐ Addition

4.1 TITLE S/D  
4.2 NAME JONES, THADDEUS  
4.3 STREET ADDRESS 14320 NW 12 Ave  
4.4 CITY-ST-ZIP Miami, FL 33168  
☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP  
☐ Change ☐ 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 another like empowered.

SIGNATURE: WILLIAM G. MAUZY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 13, 1999

Date

Daytime Phone #

CR2E034 (11/98)