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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

(0)

DOCUMENT #
1. Corporation Name

MAC CORPORATION	
Principal Place of Business	Mailing Address
% ROSE MARIE CHALEK	% ROSE MARIE CHALEK



						( 1991bi 11911 9)818 19161 81115 A1901			
hinoipal Place O	f Business	Mailing Addres	SS						
% ROSE MARI			ARIE CHALEK						
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FOUNTAIN TIL	LG MZ 03200	, 00,,,,,,,	7,1120	-		3. Date Incorporated or Qualified 12/18/1946		1/19/199	95
Principal Plac	ee of Business	2a. Mailing Ad	Idress			4. FEI Number			Applied For
		26				59-0672763			Not Applicable
Suite, Apt #,	etc	Suite, Apt.	. #, etc.			5. Certificate of Status Desired			Additional Required
		City & Sta				6. Election Campaign Financing		\$5.00	May Be
City & State		28				Trust Fund Contribution	LJ		d to Fees
Ζ <sub>1</sub> ρ	Country	Ζιρ		Country		8. This corporation has liability for	intangible ta	x under s	199.032,
	25	29	3	0			□ No	A1	
	9. Name and Address of C	urrent Registered Age	nt		r	10. Name and Address of New F	legisterea	Agent	
				61	Name				
CASSEL	, MARWIN S., P.A.			82	Street Add	dress (P.O. Box Number is Not Acceptate	ole)		
	OUSE CENTER,			83					
	/. 1ST AVENUE							85 Z	p Code
MIAMI F				84		oration submits this statement for the pu pard of directors. I hereby accept the app	FL	.   `	•
	Surviving typed or printed earlier of register		NOTE	Flagistered Age 13.	rit signature requ	and when reinstating:  ADDITIONS/CHANGES TO OF			
<b>2</b> .		RS AND DIRECTORS	DC: FIE		т-			Change	
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cert by 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 onth; that I arm 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.

INTED NAME OF SIGNING OFFICER OR DIRECTOR