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

CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

(2)

MISHAEL IMPORT & SUPPLY INC.

FILED	
Apr 16 1998 8:00an	1
Secretary of State	



Principal Place of Business Mailing Address										
4000 NW 25TH ST. P. O. BOX 650946 MIAMI FL 33142-6724			Ρ.	4000 NW 25TH ST. P. O. BOX 650946 MIAMI FL 33142-6724				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
								02/02/1973		
2. Principal Place of Business			— 1	2a. Mailing Address				4. FEI Number Applied Fo 59-1467498 Not Applie		
Suite, Apt. #, etc.				Suite, Apt. #, etc.				SS 75 Additions	-	
22			27	├─n ' '				5. Certificate of Status Desired Fee Required	"	
City & State				City & State				6. Election Campaign Financing \$5.00 May Be	\Box	
23			28	28				Trust Fund Contribution Added to Fees		
Zip		Country		Z _I p Country				8. This corporation owes or has paid the current year Intangible		
24	2	- 	29		30		· · · · · · · · · · · · · · · · · · ·	Personal Property Tax due June 30. Yes No		
1.00	<u></u> -	nd Address of Curr	ent Hegiste	ered Agent		31	Name	10. Name and Address of New Registered Agent		
	SHAEL, ISAA									
	357 SW 64TI				E	32	Street Addre	ddress (P.O. Box Number is Not Acceptable)		
IMIZ	AMI FL 3318	3			E	33			\dashv	
					-		0.0	21. O. J.	\dashv	
					١	34	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 obligations of, Section 607.0505, Florida Statutes.										
SIGNATURE	Signature, typed or	printed name of registered	agent and tile it	applicable. (NO	TE: Registered /	Age	ent signature require	od when reinstaling) DATE		
12.		OFFICERS A	ND DIRECT	rors .	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	——	
TITLE	1			DELETE 1.1 TIT		E		Change Ado	dition	
NAME MISHAEL, ISAAC				1.2 NAME						
STREET ADDRESS	48444 51 00400				1.3 STREET ADDRESS					
CITY-ST-ZIP	MIAMI FL	MIAMI FL 33183		DELETE	_	1.4 CITY-ST-ZIP		Change Ado	dition	
TITLE				[] DELCIE	DELETE 2.1 TITES			E J Ollange E L Ave		
NAME STREET ADDRESS				2.3 STREE		ADDRESS				
CITY-ST-ZIP					2. 4 CITY - S		i i			
TITLE				DELETE				Change Add	dition	
NAME				3.2 NAM	AE .					
STREET ADDRESS				3.3 STREET ADDRESS		ADDRESS				
CITY-ST-ZIP	CITY-ST-ZIP			3.4. CITY-ST-ZIP		ST - ZIP				
TITLE				L_ DELETÉ	4.1 TITL	E		Change Add	dition	
NAME					4. 2 NA	ΝE				
STREET ADDRESS							ADDRESS			
CITY-ST-ZIP				DELETE	4.4 CITY		T-2IP	Change Add	dition	
TITLE				☐ OECCIE	5.1 TITL			E change	uition	
NAME Street address					5.2 NAM		ADDRESS			
					5.4 CITY					
CITY-\$T-ZIP TITLE				DELETE	6.1 TITL			Change Add	dition	
NAME					6.2 NAM					
STREET ADDRESS							ADDRESS			
CITY-ST-ZIP					6.4 City	/ - S	T- ZIP			
14. I hereby o	certify that the	information supplied	with this file	ing does not qualify	for the exer	npl	tion stated in t	Section 119.07(3)(i), Florida Statutes. I further certify that the informa re shall have the same legal effect as if made under oath; that I am a	tion	

indicated on this annual report or supplemental annual report is true and accurate and injurity signature shall have the same legal effect as it made under dail; that I am a 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.