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**

DOCUMENT # 678816

1. Corporatio		COCIATEO IN	NO.						
M.S. GII	MIDEL & AS	SSOCIATES, IN	NU.	•					
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Principal Place of Business Mailing Address									
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LAGOLITOR	LL 1 L 00001		''	DAUDENDALL TE 3300	•		DO NOT WRITE	IN THIS SPACE	
							3. Date Incorporated or Qualifed		•
							07/17/1980	• • •	
<u></u>				2a, Mailing Address			4. FEI Number	├	Applied For
21			26	26			59-2019676		Not Applicable
Suite, Apt. #, etc.			27	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional Required
City & Stat	te			City & State			6. Election Campaign Financing	¬ \$5.0	May Be
23			28				Trust Fund Contribution Added to Fees		
Zip	_	Country	— —	Zip	Count	try	8. This corporation owes the current		<u></u>
24		5	29		30		Personal Property Tax.	Yes	□No
	9. Name a	ind Address of Cui	rrent Regist	tered Agent	8	1 Name	10. Name and Address of New Reg	jistered Agent	
GIMI	BEL, MICHAE	EL S.			Ľ				
431 W LAKE DASHA DR				82 Street Addre			ress (P.O. Box Number is Not Acceptable)		
PLANTATION FL 33324				8	13	- 1 () () () () () () () () () (1 4 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	
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II. Fulsualii		115 UI SECTIONS 6U/.	JOUZ AND DU	07.1508, Florida Statu	tes, the abo	ve-named co	orporation submits this statement for the pu	iposo oi changing i	is registered
office or r	registered ager	nt. or both, in the St	tate of Florida	la. Such change was a	authorized b	v the corpora	orporation submits this statement for the pu- ation's board of directors. I hereby accept the	ne appointment as	registered
office or r agent. I a	registered ager	nt. or both, in the St	tate of Florida	07.1508, Florida Statu la. Such change was a Section 607.0505, Flo	authorized b	v the corpora	orporation submits this statement for the pu ation's board of directors. I hereby accept th	ne appointment as	registered
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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.

6.4 CITY-ST-ZIP

SIGNATURE:

FILED

Feb 11, 1999 8:00am

Secretary of State

02-11-1999 90017 020 ***150.00