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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F16656

MIZELL & ASSOCIATES, INC.

(3)

FILED			
Mar	11	1998	8:00am
Se	crei	tary o	f State



Principal Place of Business Mading Address 2270 NW 6 ST. 11401 SW 16 ST. FT.LAUDERDALE FL 33311 DAVIE FL 33325 DO NOT WRITE IN THIS SPACE US US 3. Date Incorporated or Qualified 01/29/1981 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2062626 21 26 Not Applicable Suite, Apt. #, etc Suite, Apt #, etc \$8.75 Additional П 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 MIZELL, LORRAINE G Name 11401 SW 18 ST. 82 Street Address (P.O. Box Number is Not Acceptable) **DAVIE FL 33325** 83 84 City Zip Code 85 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, typod or printed name of repidered agent and tilled applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1.1 TITLE MIZELL, LORRAINE G NAME 1.2 NAME 11401 S.W. 16TH ST. STREET ADDRESS 1.3 STREET ADDRESS DAVIE FL 33325 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE THLE Change Addition 2.1 TITLE MIZELL-BLANCO, MYRTIS NAME 22 NAME 3241 NW 4 CT. STREET ADDRESS 2.3 STREET ADDRESS FT LAUDERDALE FL 33311 CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CiTY-ST-ZiP TITLE DELETE 4.1 TOTLE __ Change ☐ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET 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 suppliemental artifulal crief that I am an officer or director of the corpy alien or the receiver or tristee employeered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE

orvaine Moell