FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAR -2 PM 1:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F20232** **(7)**

1. Corporation Name
MEC III CORPORATION

Principal Place of Business	Mailing Address
% MARIO E CARDENAS 16392 STONEHAVEN RD MIAMI LAKES FL 33014-3068	% MARIO E CARDENAS 16392 STONEHAVEN RD MIAMI LAKES FL 33014-3068

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 02/18/1981
3a. Date of Last Report: 04/26/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / Country — 25 / Zip — 29 / Country — 30

4. FEI Number: 59-2092395 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

CARDENAS, MARIO E
2655 LEJUENE ROAD
SUITE 600
CORAL GABLES FL 33141

10. Name and Address of New Registered Agent

81 Name: MARIO E. CARDENAS
82 Street Address (P.O. Box Number is Not Acceptable): 16392 STONEHAVEN RD.
83
84 City: MIAMI LAKES **FL** 85 Zip Code: 33014

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: MARIO E. CARDENAS — 2/25/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	1.1 TITLE	PTD ☒ Change ☐ Addition
NAME	CARDENAS, MARIO E	1.2 NAME	SILVIA A. CARDENAS
STREET ADDRESS	7350 W 16TH AVENUE	1.3 STREET ADDRESS	16392 STONEHAVEN RD.
CITY-ST-ZIP	HIALEAH FL	1.4 CITY-ST-ZIP	MIAMI LAKES, FL 33014-6068
TITLE	VSD	2.1 TITLE	VSD ☒ Change ☐ Addition
NAME	CARDENAS, SILVIA A	2.2 NAME	MARIO E. CARDENAS
STREET ADDRESS	7350 W 16TH AVENUE	2.3 STREET ADDRESS	16392 STONEHAVEN RD
CITY-ST-ZIP	HIALEAH FL	2.4 CITY-ST-ZIP	MIAMI LAKES, FL 33014-6068
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: MARIO E. CARDENAS — MARIO E. CARDENAS — 2/25/95 — (305) 823-8017
SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR — Date — Daytime Phone #

0004748 CP