## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT , CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 DOCUMENT #

F57623

(3)

MIJENSUE, INC.  Principal Place of Business Mailing Address  ** ROBERT J. RICE  *** ROBERT J. RICE  724 NW. 7TH AVE  724 NW. 7TH AVE									
724 N.W. 7TH AVE 725 N.W. 7TH AVE 725 N.W. 7TH AVE 726 N.				33311-7309		3. Date Incorporated or Qualifie		3a. Date of Last Report	
						12/08/1981		01/31/1995	
Principal P	lace of Business	2	a. Mailing Address			4. FEI Number NOT APPLICABLE	=	Applied For Not Applied	
	<u></u>	26				NOT APPLICABLE	<u>-</u>	\$8.75 Additiona	
Suite, Apt.	#, etc.	27	Suite, Apt. #, etc.			5. Certificate of Status Desired		Fee Required	
City & State			City & State			6. Election Campaign Financing	9 _	\$5.00 May Be	
ony a ora		21	<u> </u>			Trust Fund Contribution		Added to Fees	
	Country	,	Zip	Country	1	8. This corporation has liability	for intangible	tax under s 199.032,	
	25	29		30			Yes No		
	9. Name and Addre	ss of Current Reg	distered Agent		1-1.	10. Name and Address of New	w Registered	1 Agent	
				81					
	ROBERT J.			82	Street Addr	ress (P.O. Box Number is Not Accep	otable)		
	N 7TH AVE			83	ļ				
FT. LAI	UDERDALE FL			"					
				84	City		F	85 Zip Code	
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familiar w	vith, and accept the obligation of Signature, typed or priored name	itions of, Section 6	e fapolicable (	es. NOTE: Registered Age		nd when reinstating	DATE OFFICERS AN	ND DIRECTORS IN 12	
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familiar w ANATURE F	Signar as Special photost name  PD  RICE, ROBERT J	of registered agent and tit OFFICERS AND DIF	e if applicable (RECTORS	NOTE: Registered Age  13.  1.1 TITLE  1.2 NAME	ont signature require	nd when reinstating			
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SIGNATURE:

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/07/96 305-524-5760