

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F98000002637** ✓

1. Corporation Name

MOUNTAIN MAN ENGINE, INC.

Principal Place of Business
**2780 HAMILTON BLVD
SOUTH PLAINFIELD NJ 07080**

Mailing Address
**2780 HAMILTON BLVD
SOUTH PLAINFIELD NJ 07080**

FILED
Jul 15, 1999 8:00 am
Secretary of State

07-15-1999 90007 031 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/11/1998

4. FEI Number

22-3008917

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 owes the current year
Intangible Personal Property. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**RATHBURN, PATRICIA A
217 N.E. 2ND STREET
FT LAUDERDALE FL 33301**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 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

Dina Salerno
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

7/6/99

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | | |
|----------------|---------------------------|---------------------------------|
| TITLE | P | <input type="checkbox"/> DELETE |
| NAME | DEBLASIO, CLARK | |
| STREET ADDRESS | 2780 HAMILTON BLVD | |
| CITY-ST-ZIP | S PLAINFIELD NJ | |
| TITLE | V | <input type="checkbox"/> DELETE |
| NAME | CHODACK, MICHAEL | |
| STREET ADDRESS | 2780 HAMILTON BLVD | |
| CITY-ST-ZIP | S PLAINFIELD NJ | |
| TITLE | CD | <input type="checkbox"/> DELETE |
| NAME | LESSER, N L | |
| STREET ADDRESS | 2780 HAMILTON BLVD | |
| CITY-ST-ZIP | S PLAINFIELD NJ | |
| TITLE | | <input type="checkbox"/> DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

| | | |
|--------------------|--|--|
| 1.1 TITLE | S & T | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 1.2 NAME | DINA SALERNO | |
| 1.3 STREET ADDRESS | 2780 HAMILTON BLVD. | |
| 1.4 CITY-ST-ZIP | S. PLAINFIELD, NJ 07080 | |
| 2.1 TITLE | VP | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 2.2 NAME | DEBRA LESSER | |
| 2.3 STREET ADDRESS | 2780 HAMILTON BLVD. S. PLAINFIELD, NJ | |
| 2.4 CITY-ST-ZIP | | |
| 3.1 TITLE | VP | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 3.2 NAME | AL YOUNG | |
| 3.3 STREET ADDRESS | 2780 HAMILTON BLVD | |
| 3.4 CITY-ST-ZIP | S. PLAINFIELD, NJ 07080 | |
| 4.1 TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.2 NAME | | |
| 4.3 STREET ADDRESS | | |
| 4.4 CITY-ST-ZIP | | |
| 5.1 TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 5.2 NAME | | |
| 5.3 STREET ADDRESS | | |
| 5.4 CITY-ST-ZIP | | |
| 6.1 TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 6.2 NAME | | |
| 6.3 STREET ADDRESS | | |
| 6.4 CITY-ST-ZIP | | |

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.

SIGNATURE: *Dina Salerno*

DINA SALERNO, SEC/TREASURER

7/6/99

908-668-0880

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0122891

CR2E034 (5/99)

F980000002637
588747-90007
731



MOUNTAIN MAN ENGINE INC.

2780 Hamilton Boulevard
South Plainfield, New Jersey 07080
Phone (908) 668-0880
Fax (908) 668-0809

July 6, 1999

Division of Corporations
Annual Reports Filings
P. O. Box 6327
Tallahassee, FL 32302-1500

Dear Sir:

Per your instructions, we are writing this note to let you know that we had not previously received any paperwork on the 1999 Profit Corporation Annual Filing Report. The first notification was received on July 2, 1999.

Enclosed is our check #15733 in the amount of \$150 to cover the filing fee, along with all the required, signed paperwork.

If you require any further information, please contact us.

Sincerely,

MOUNTAIN MAN ENGINE INC.



Dina Salerno
Sec/Treasurer

Ds
Enclosures