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Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # H39017 (9) 1. Corporation Name THE MI TEN CORPORATION			
Principal Place of Business 12721 S.W. 70th Ave. Miami, FL 33156		Mailing Address 12721 S.W. 70th Ave. Miami, FL 33156-6230	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	
3. Date Incorporated or Qualified 01/22/1985		4. FEI Number 59-2490257	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 ☐ Yes ☐ No		8. Name and Address of Current Registered Agent DIARCY, COLIN 12721 S.W. 70 TH AVENUE MIAMI FL 33156	
9. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code		10. 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 _____ DATE _____	
11. OFFICERS AND DIRECTORS 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP 13. TITLE NAME STREET ADDRESS CITY-ST-ZIP 14. TITLE NAME STREET ADDRESS CITY-ST-ZIP 15. TITLE NAME STREET ADDRESS CITY-ST-ZIP 16. TITLE NAME STREET ADDRESS CITY-ST-ZIP 17. TITLE NAME STREET ADDRESS CITY-ST-ZIP 18. TITLE NAME STREET ADDRESS CITY-ST-ZIP 19. TITLE NAME STREET ADDRESS CITY-ST-ZIP 20. TITLE NAME STREET ADDRESS CITY-ST-ZIP 21. TITLE NAME STREET ADDRESS CITY-ST-ZIP 22. TITLE NAME STREET ADDRESS CITY-ST-ZIP 23. TITLE NAME STREET ADDRESS CITY-ST-ZIP 24. TITLE NAME STREET ADDRESS CITY-ST-ZIP 25. TITLE NAME STREET ADDRESS CITY-ST-ZIP 26. TITLE NAME STREET ADDRESS CITY-ST-ZIP 27. TITLE NAME STREET ADDRESS CITY-ST-ZIP 28. TITLE NAME STREET ADDRESS CITY-ST-ZIP 29. TITLE NAME STREET ADDRESS CITY-ST-ZIP 30. TITLE NAME STREET ADDRESS CITY-ST-ZIP 31. TITLE NAME STREET ADDRESS CITY-ST-ZIP 32. TITLE NAME STREET ADDRESS CITY-ST-ZIP 33. TITLE NAME STREET ADDRESS CITY-ST-ZIP 34. TITLE NAME STREET ADDRESS CITY-ST-ZIP 35. 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SIGNATURE: *Gilbert L. Bieger*, Treasurer
Date: *April 9, 1998* (954) 564-1928