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PROFIT CORPORATION ANNUAL REPORT

1997

M N L O. INC.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H73667

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IVISION OF COR

FILED Mar 10 1997 8:00am Secretary of State

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CLERNOMT FL 34711 CLERNOMT FL 347120759 US	Principal Place of Business Mailing Address				e samtete atte strad titen ditte \$100 (\$44		Timal minte imit.	
3. Date Incorporated or Qualified Sa. Date of Leef Report 04/16/1996 C4/16/1996 C4/16/19	725 ALMONO ST							
2. Principal Flore of Business 2. A Mailing Address 3. Date Incorporated or Qualified State State Flepon CA/16/1998 3. File Number Applied For Style 1985 Applied For S	US	. 34/11						
22. Mode ing Address 22. Mode ing Address 23. Mode ing Address 24. Mode ing Address 25. Sep 2578435								
Suite, Apt #, etc. Suite,	2. Principal F	Place of Business	2a. Mailing Address		***************************************	<u> </u>	01/10/100	
Suito, April P., etc. Suito Suito	21		26			59-2578495		
City & State City & State City & Country State	Suite, Apt	#, etc.					\$8.7	
28 Trust Fund Contribution Added to Fees 24 29 29 39 Country 8. This corporation has liability for intengible lax under s. 199 032. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent ADKINS, BETTY S 475 W. LAKSHORE DRIVE 28 Street Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisione of Sections 607 0602 and 607 1508, Blorida Statutes, the above-named corporation submits his statement for the purpose of changing its registered office or registered agent of both in the State of Fiorida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent of both in the State of Fiorida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent of the financiar wint, and accept the changing its registered agent and transfer wint, and accept the changing its registered agent of product predictions and product agent and appointment as registered agent of the financiar wint, and accept the change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent of both, in the State of Fiorida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent of both, and the product agent and accept the change as authorized by the corporation's board of directors. Thereby accept the appointment as registered agent agents and accept the change as authorized by the corporation should director. Thereby accept the appointment as registered agent agents and accept the change as authorized by the corporation about the product agent and accept the change as authorized by the corporation and accept the change as authorized by the corporation and accept the change as authorized by the corporation and accept the change as authorized by the corporation and accept the change as authorized by the corporation and accept the change as auth	22		27			Certificate of Status Desired		
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9. Name and Address of Curront Registered Agent ADKINS, BETTY S 475 W. LAKSHORE DRIVE CLERMONT FL 34711 11. Pursuant to the provisione of Sister of Curron Registered Agent 12. Pursuant to the provisione of Sister Registered Agent and Curron Registered Agent and Registered Agent	23		28			Trust Fund Contribution		
9. Name and Address of Current Registered Agent ADKINS, BETTY S 475 W. LAKSHORE DRIVE CLERMONT FL 34711 82 Street Address (P.O. Box Number is Not Acceptable) 83 Bat City FL 85 Zip Code 11. Pursuant to the previsions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered ochoc 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 of the purpose of changing its registered agent of the pu		Country		——	y			er s. 199.032,
ADKINS, BETTY S 475 W. LAKSHORE DRIVE CLERMONT FL 34711 82 Street Address (P.O. Box Number is Not Acceptable) 83 B4 City FL 85 Zip Code 84 City FL 86 Zip Code 85 Zip Code 86 Zip Code 87 Zip Code 87 Zip Code 88 Zip Code 88 Zip Code 89 Zip Code 89 Zip Code 80 Zip Code 81 Zip Code 82 Zireet Address (P.O. Box Number is Not Acceptable) 83 Zip Code 84 City FL 85 Zip Code 85 Zip Code 86 Zip Code 87 Zip Code 88 Zip Code 88 Zip Code 88 Zip Code 88 Zip Code 89 Zip Code 80 Zip Cod	24			30	·····			
475 W. LAKSHORE DRIVE CLERMONT FL 34711 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zup Code 85 City FL 85 Zup Code 86 City FL 85 Zup Code 87 PL 87 Zup Code 88 City FL 85 Zup Code 89 City FL 80 Zup Code 80 City FL 80 Zup Code 80 City FL 80 Zup Code 80 City FL 80 Zup Code 81 Zup Code Code 82 City FL 80 Zup Code 83 Zup Code 84 City FL 80 Zup Code 85 Zup Code 86 City FL 80 Zup Code 87 Zup Code 88 City FL 80 Zup Code 89 Zup Code 80	AD1		11 Registered Agent		T .:	10. Name and Address of New Re	glatered Agent	
CLERMONT FL 34711 11. Pursuant to the provisions of Sections 607.6502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered colors or riginized degret, or florid, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered statement and provisional accept the congalators of, Section 607.6508, Florida Statutes. SIGNALURE 12. OF FLCERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. INTERPORT AUTHORS 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. INTERPORT AUTHORS 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIO				81	Name			
Basilian				82	Street Add	dress (P.O. Box Number is Not Acceptab	le)	
11. Furcious 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 1 am farmism with, and accept the obligations of, Section 607 0505. Florida Statutes. SIGNATURE	CLE	:RMUN1 FL 34/11			ļ			·
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 registerer office or registered agent, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE 12. For First RAND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. In Title 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 29. ADDITIONS/CHAN				83				
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. Lor 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 Lor discount in the state of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered signal and management with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE 12. OF FICE RS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 NAME ADMINIS, BETTY S 475 W. LAKSHORE DRIVE CLERNONT FL 34711 14. DIY-ST-2P BUSHNELL FL 33513 D				84	City		85	Zin Code
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14. I do 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 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 Blog: 13 if changed, or on an altachment with an address.

SIGNATURE

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