FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H74319

(5)

1. Corporatio	MIMAUMA CITY CORP.	(3)						
Principal Place of Business		Mailing Address	Mailing Address		- I INDIEN BEH INDIN NITER HIND HERFE	1044 - 41041 -0141	STOP GROW BIDLI OF	H FOOI
7540 SW 5 ST SUITE 7 PLANTATION FL 33317		PO BOX 16570 PLANTATION FL 33318 US	-6570					
US					 Date Incorporated or Qualifie 09/03/1985 		ate of Last Repo	ort
2. Principal Place of Business		2a. Mailing Address			4. FEI Number		Applie	ed For
Suite, Apt	# atc	26 Suite, Apt. #, etc.			59-2580361			Applicable
22	н, вк	27			5. Certificate of Status Desired		\$8.75 Add Fee Regul	
City & State		City & State			6. Election Campaign Financing \$5.00 May Be			
23		28			Trust Fund Contribution			
Zip	Country	Zip	·		8. This corporation has liability f	or intangible Yes		39 .032,
24	25 9. Name and Address of C	29 Surrent Registered Agent	30		Florida Statutes 10. Name and Address of New			
WE	ISS, SUZANNE ROSS		· · · · · · · · · · · · · · · · · · ·	81 Name		·····		
732		}	82 Street Add	ress (P.O. Box Number is Not Accep	table)			
	NDON BUS CENTER							
PLA	INTATION FL 33317		1	63				
			Ì	84 City		Fl	85 Zip Coo	de
11. Pursuant	to the provisions of Sections 60	7 0502 and 607 1508, Florida Sta	tutes, the ab	ove-named corp	poration submits this statement for th	e purpose o	of changing its re	egistered
office or r agent. La	registered agent, or both, in the im familiar with, and accept the i	State of Floridal Such change was obligations of, Section 607,0505,	is authorized Florida Stati	I by the corporat Ites.	poration submits this statement for the tion's board of directors. I hereby ac	cept the ap	pointment as reg	gistered
CICKIATURE:								
12.	Signature, typed or puriled name of register	red agent and title if opplicable (*) S AND DIRECTORS	NOTE: Registered	Agent signature requi	red when reinstating) ADDITIONS/CHANGES TO OF	DATE FICERS AN	D DIRECTORS I	N 12
TITLE	VPS DELETE		1.1 111	LE	7.001710107070117110E0 TO OT	11021107114		Addition
NAME	WEISS, SUZANNE R.		1.2 NA	ME				
STREET ADDRESS	7320 SW 18 ST		1.3 ST	REET ADDRESS				
CITY-ST-ZIF	PLANTATION FL		1.4 CIT	Y-ST-ZIP				
TITLE	PTD DELETE		2.1 111				Change	Addition
NAME	WEISS, DONALD 7320 SW 18 ST		2.2 NA					Ì
STREET ADDRESS	PLANTAITON FL			REFT ADDRESS TY+ST+ZIP				
CITY-ST-ZIP TITLE	DELETE		3.1 TIT				☐ Change	Addition
NAME			3.2 NA	ME				
STREET ADDRESS			3.3 \$1	REET ADDRESS				
CITY-ST-ZIP			3.4. CI	TY-ST-ZIP			· · · · · · · · · · · · · · · · · · ·	
TITLE	☐ DELETE		4.1 1(1				Change [Addition
NAME			4. 2 NA	1				l
STREET ADDRESS				REET ADDRESS				
CITY+ST+ZIP TITLE			4.4 CIT	Y-ST-ZIP LE			Change	Addition
NAME		hand o - and p	5.2 NA					
STREET ADDRESS				REET ADORESS				
CITY - ST - ZIP			5 4 CIT	Y-ST-ZIP				
TITLE		☐ DELETE	6.1 TIT	LE			Change	Addition
NAME			6 2 NA	ME				
STREET ADDRESS	1		6.3 ST	REET ADDRESS				

64 CITY - ST - ZIP 14. If 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 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

SIGNATURE:

appears in Block 12 ¢

CITY - ST - ZIP

FILED

Jan 17 1997 8:00am

Secretary of State