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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90039 018 ***150.00

DOCUMENT # H90826

MICHAEL T. YEARY ENTERPRIZES INC.

1					
Principal Place	of Business	Mailing Address		I (MAIAI) ALIA IAIS) BAIRT IELIA IIAIS DIIL D	INCO RIBIL ALBEL ANDLI DINIL ALALI HUNI
1530 NW 26TH	AVE	1530 NW 26TH AVE			
POMPANO BEACH FL 33061 POMPANO BEACH FL 3306		· ·	DO NOT WRITE IN T	THIS SDACE	
				3. Date Incorporated or Qualifed	TIS SPACE
				12/19/1985	
a Principal Di	ace of Business	2a. Mailing Address		4, FEI Number	Applied For
	ace of business	26		59-2622388	Not Applicable
Suite, Apt,	# etc	Suite, Apt. #, etc.			\$8.75 Additional
22	,, 4.5.	27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	 This corporation owes the current year 	r Intangible
24	25		30	Personal Property Tax.	X Yes □No
	g. Name and Address of Curre	ent Registered Agent	81 Name	10. Name and Address of New Registe	red Agent
VEA	N MOUAEL T		81 Name		
YEARY, MICHAEL T. 1530 NW 26TH AVE			82 Street A	ddress (P.O. Box Number is Not Acceptable)	
	PANO BEACH FL 33060		83		
POM	PANO DEACH FL 33000		83		
ļ			84 City		FL 85 Zip Code
<u>.</u>		500 CO2 4500 Florida Cirk da	the shave named a	corporation submits this statement for the purpos	
S Affica	agistered agent or both in the Stat	ta of Florida. Such chanda was al	ithorized by the como	ration's board of directors. I hereby accept the a	ppointment as registered
agent. I a	m familiar with, and accept the obliq	gations of, Section 607.0505, Flor	rida Statutes.		
SIGNATURE	Signature, typed or printed name of registered a	and and title if applicable (NOTE:	Registered Agent signature re-	ouized when reinstating) DAT	E
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	MILARSKY, JACOB		1.2 NAME		
STREET ADDRESS	1530 N.W. 26TH AVENUE		1.3 STREET ADDRESS		
CITY-ST-ZIP	POMPANO BEACH FL		1,4 CITY-ST-ZIP		Y
TITLE	P	DELETE	2.1 TITLE		
NAME	YEARY, MICHAEL T.				☐ Change ☐ Addition
STREET ADDRESS	1530 N.W. 26TH AVENUE		2.2 NAME		☐ Change ☐ Addition
CITY-ST-ZIP			2.2 NAME 2.3 STREET ADDRESS	•	☐ Change ☐ Addition
TITLE	POMPANO BEACH FL		1		
	POMPANO BEACH FL	☐ DELETE	2.3 STREET ADDRESS	· · · · · ·	☐ Change ☐ Addition
NAME	POMPANO BEACH FL	☐ DELETE	2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	·	
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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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: