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Apr 22 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J18224 (2)

1. Corporation Name
M.R.I. HOLDING COMPANY, INC.

Principal Place of Business
7500 NW. 5TH ST., STE.112
PLANTATION FL 33317

Mailing Address
6901 W BROWARD BLVD
STE 203
PLANTATION FL 33317-2912
US



2. Principal Place of Business
21 201 NW 82nd Ave

2a. Mailing Address
26 201 NW 82nd Ave

Suite, Apt. #, etc.
22 205

Suite, Apt. #, etc.
27 205

City & State
23 PLANTATION, FL

City & State
28 PLANTATION, FL

Zip
24 33324

Country
25 USA

Zip
29 33324

Country
30 USA

3. Date Incorporated or Qualified
06/05/1986

3a. Date of Last Report
03/06/1996

4. FEI Number
59-2693243

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 has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

NEMEROFSKY, STEPHEN
6901 W BROWARD BLVD
STE 203
PLANTATION FL 33317

81 Name NEMEROFSKY, STEPHEN
82 Street Address (P.O. Box Number is Not Acceptable)
201 NW 82nd Ave
83 Suite 205
84 City Plantation FL 85 Zip Code 33324

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3/1/97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
DP	ABRAHAMS, MICHAEL	11401 S.W. 1ST COURT	PLANTATION FL	<input type="checkbox"/>
D	GOLDSTEIN, RICHARD	6971 W. SUNRISE BLVD.	PLANTATION FL	<input type="checkbox"/>
TD	NEMEROFSKY, STEPHEN	6901 W BROWARD BLVD STE 203	PLANTATION FL	<input type="checkbox"/>
S	RUSKIN, HOWARD	8251 W. BROWARD BLVD.	PLANTATION FL	<input type="checkbox"/>
V	KAPILA, DEEPAK	7050 N.W. 4TH ST.	PLANTATION FL	<input type="checkbox"/>

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>

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 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 recorder 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/1/97 9954-4704/3900

CR2E034 (9/96)