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

DOCUMENT # J36265

1. Corporation Name

MAYARO INC.

FILED Mar 08, 1999 8:00 am Secretary of State

03-08-1999 90062 003 ***150.00

***************************************	·					
Principal Plac	ce of Business	Mailing Address				
1221 LEXINGTON COURT EL DORADO HILLS CA 95762 EL DORADO HILLS CA 95762 EL DORADO HILLS CA 95762						
	IILLS CA 95762	EL DORADO HILLS CA 90	762			
us us						DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified 10/03/1986
2. Principal f	Place of Business	2a. Mailing Address				4. FEI Number Applied For
21		26				59-1982546 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certifcate of Status Desired
City & Sta	te	City & State	•			6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	Co	untry		8. This corporation owes the current year Intangible
24	25	29	30			Personal Property Tax. Yes No
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered Agent
DO!	VIE DATRICK IN			81	Name	
				Street Ad	Address (P.O. Box Number is Not Acceptable)	
	ipal Place of Business Apt. #, etc. State Country 25 9. Name and Address of Current DOYLE, PATRICK W. 800 WEST MORSE BLVD., SUITE 1 WINTER PARK FL 32789 Suant to the provisions of Sections 607.050 to or registered agent, or both, in the State nt. 1 am familiar with, and accept the obligation of Signature, typed or printed name of registered agent. It is a familiar with, and accept the obligation of Signature, typed or printed name of registered agent. OFFICERS AN PD ALBADA-JELGERSMA, FRIC 1221 LEXINGTON COURT EL DORADO HILLS CA ORESS PEL DORADO HILLS CA V MACKAY, JOHN D. L. 650 W GEORGIA ST 21ST FLO					
AAHA	HER PARK FL 32/89			83		
				84	City	85 Zip Code
				-	Oity	FL (3) = 5000
SIGNATURE	Signature, typed or printed name of registered agent a		_		t signatura requ	quired when reinstating) DATE ADDITIONS (CHANCES TO OFFICERS AND DIRECTORS IN 12)
TITLE		DELETE	13			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
NAME	1		1.2 NAME			
	4004 LEVINOTON COURT				ADDRESS	
STREET ADDRESS	1		1.3 STREET			
CITY-ST-ZIP TITLE		☐ DELETE	_	CITY-SI TITLE	-ZIP	☐ Change ☐ Addition
NAME	1 1 7 7			AME	- 1	
STREET ADDRESS	1				ADDRESS	
			1		l l	
CITY-ST-ZIP TITLE	V	☐ DELETE	_	CITY-S	I-ZIP	Change ☐ Addition
NAME	MACKAY, JOHN D. I.			IAME		
STREET ADDRESS)R			ADDRESS	
CITY-ST-ZIP	VANCOUVER BR V6B 4	,		CITY-S		
TITLE	V	☐ DELETE		TTLE	1-21/	☐ Change ☐ Addition
NAME	SAUNDERS, RODERICK G.			NAME		_ , _
STREET ADDRESS	APA MI OFOROM OF MART FLOOR)Ř			ADDRESS	
CITY-ST-ZIP	VANCOUVER BR V6B 4	•••		TY-ST	- 1	
TITLE			7.7			
NAME		☐ DELETE	5.1 T	TILE	i	☐ Change ☐ Addition
STREET ADDRESS				ITLE IAME		Change Addition
CITY-ST-ZIP		☐ DEFEIE	5.2 N	AME	ADDRESS	☐ Change ☐ Addition
			5.2 N 5.3 S	AME		☐ Change ☐ Addition
TITLE		☐ DELETE	5.2 N 5.3 S	AME TREET TY-ST		Change Addition
TITLE			5.2 N 5.3 S 5.4 C 6.1 T	AME TREET TY-ST		
			5.2 N 5.3 S 5.4 C 6.1 T 6.2 N	TREET CITY-ST TILE		

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 chapted, or on an attachment with an address, with all other like empowered.

916-933-3067