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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

J37694

(3)

FILED Jan 27 1998 8:00am Secretary of State

Principal Plac	MAC, INC.	Mailing Address						
7560 N.W. 1ST CT. 7560 N.W. 1ST CT. PEMBROKE PINES FL 33024 PEMBROKE PINES FL 33024						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified 10/14/1986		
2. Principal P	Place of Business	2a. Mailing Address	<u>⊢</u> ,			4. FEI Number 65-0026008		Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional Required
City & Stat	е	City & State			- "	Election Campaign Financing Trust Fund Contribution		May Be
Zip				untry		This corporation owes or has paid the Personal Property Tax due June 30.		
	g. Name and Address of Curre		1	T		10. Name and Address of New Registe		
	CNEIL, DOROTHY H.			81	Name			
	560 NW 1ST COURT EMBROKE PINES FL 33024			82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
				83	-00		1.55	
				84	City		FL 85 Zig	p Code
11. Pursuant office or agent, I a	to the provisions of Sections 607.05 registered agent, or both, in the Stata am familiar with, and accept the oblig	02 and 607.1508, Florida Stati e of Florida. Such change was gations of, Section 607,0505, f	ites, the a authorize forida Sta	bove- d by tutes.	named corporation	oration submits this statement for the purpo on's board of directors. I hereby accept the	se of changing appointment a	its registered is registered
	Signature, typed or printed name of registered ag			d Agent	t signature required		ATE	
12. TITLE	PD OFFICERS AN	ID DIRECTORS				ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	
NAME	MCNEIL, DOROTHY H.		1.2 N		1			radicon
STREET ADDRESS	7560 N.W. 1ST CT.			TREET A	DDRESS			
CITY-ST-ZIP	PEMBROKE PINES FL			1,4 CITY-ST-ZIP				
TITLE	VD	DELETE	2.1 T				Change	> Addition
NAME	WHITE, SUZANNE		2.2 N	2.2 NAME				
STREET ADDRESS	7560 N.W. 1ST COURT		2.3 \$	TREET A	DORESS			ļ
CITY-ST-ZIP	PEMBROKE PINES FL		2, 4 (CITY-ST	- ZIP			
TITLE	1D	☐ DELETE	3.1 ℃	TLE				
NAME	WHITE, BARBARA		1	3.2 NAME				ĺ
STREET ADDRESS	7650 N.W. 88TH WAY			3.3 STREET ADDRESS				
CITY-ST-ZIP TITLE	SD SD	DELETE		3.4. CITY - ST - ZIP 4.1 TITLE			Change	Addition
NAME	WHITE, WILLIAM R.	CT DETEIG		NAME			Grange	E Addition
STREET ADDRESS	7650 N.W. 88TH WAY		- 1	TREET A	DUBECC			
CITY-ST-ZIP	TAMARAC FL			ITY-ST-				
TITLE		DELETE	5.1 T				Change	Addition
NAME	1			5.2 NAME			- •	`
STREET ADDRESS				5.3 SYREET ADDRESS				
CITY-ST-ZIP	<u> </u>		5.4 C	5.4 CITY-ST-ZIP		. <u> </u>		
TITLE		DELETE		6.1 TITLE			Change	Addition
NAME			6.2 N	AME				ſ
STREET ADDRESS			6.3 S	TREET A	DDRESS			
CITY-ST-ZIP			ITY-ST-					
14. I hereby of	certify that the information supplied v	with this filing does not qualify	for the ex-	emption	on stated in S	Section 119.07(3)(i), Florida Statutes. I furth e shall have the same legal effect as if mad	er certify that the	ne 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 charged, or on an attachment with an address.

SIGNATURE

othy AMMAN HEODOROTHY H. Mc Neil Jan 19 (854) 981-5713