FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** May 07 1998 8:00am FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # J74854 MDSB. INC. Principal Place of Business Mailing Address % VIRGINIA ERDMAN % VIRGINIA ERDMAN 2701 E SUNRISE BLVD #103 2701 E SUNRISE BLVD #103 DO NOT WRITE IN THIS SPACE FT. LAUDERDALE FL 33304 FT. LAUDERDALE FL 33304 3. Date Incorporated or Qualified 05/28/1987 4. FEI Number 2. Principal Place of Business 2a. Mailing Address 2715 E.SUNRISE BWD 26 2715 E.SVNRISE BLVD
Suite, Apt. \*, etc. 65-0002284 5. Certificate of Status Desired FI. KAUDERUNKEIFL FT. LANDERDALE, FL. 6. Election Campaign Financing 39304 Trust Fund Contribution Country Country 8. This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ERDMAN, VIRGINIA 2701 E SUNRISE BLVD #103 Street Address (P.O. Box Number is Not Acceptable)
2715 E.SUDRISE BLVD FT. LAUDERDALE FL 33304

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.

84 City Applied For

Fee Required \$5.00 May Be

Added to Fees

Zip Code

Yes Yes

85

Not Applicable \$8.75 Additional

Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition 1.1 TITLE TITLE ERDMAN, VIRGINIA 1.2 NAME NUME 2523 BARBARA DRIVE 1.3 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE NAME **WOLC, LYNNETTE** 2.2 NAME 4827 MANGET CT STREET ADDRESS 2.3 STREET ADDRESS **DUNWOODY GA** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE ERDMAN, CARRIE NAME 3.2 NAME 510 SW 8TH STREET STREET ADDRESS 3.3 STREET ADDRESS FORT LAUDERDALE FL City-ST-ZIP 3.4. CITY-ST-ZIP DELETE Addition 4.1 TITLE TITLE **WOLC, JESSE** 4.2 NAME NAME 4827 MANGET CT. STREET ADDRESS 4.3 STREET ADDRESS **DUNWOODY GA** CITY-ST-ZIP 44 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE **ERDMAN, JAMES** NAME 5.2 NAME 2523 Barbara dr. STREET ADDRESS **5.3 STREET ADDRESS** FT LAUDERDALE FL CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADORESS 6.3 STREET ADDRESS 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 it champed, or on an attachment with an address

SIGNATURE

SIGNATURE

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SIGNATURE!/WAL