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PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE



FLORIDA DEPARTMENT OF STATE

FILED

Jan 24 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J99363

(0)

THE MIKEN CORPORATION

ITE MIN	EN CORPORATION							
Principal Place	of Business	Mailing Addres	Mailing Address				III WYWPE WAWAI BA	MIN MANNA NEMES RHWAT 1801
5523 W. CYPRI	ess street		5523 W. CYPRESS STREET					
STE. R-3 TAMPA FL 338	07	STE. R-3 Tampa Fl 3360	TAMPA FL 33607-1707					
US		US				 Date Incorporated or Qualified 10/23/1987 		e of Last Report 9/1996
2. Principal Pa	ace of Business	2a. Mailing Add	iress			4. FEI Number 59-2857923	1	Applied For Not Applicable
Suite, Apt	#, etc		Suite, Apt. #, etc.				<u> </u>	\$8.75 Additional
22 R-2		27 R-2				5. Certificate of Status Desired	UK)	Fee Required
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
Zip Country		Ζιp	ļ	Country		8. This corporation has liability fo		
24	25 9. Name and Address of Cu	29 rept Peoletered Agent	3	0	····	Florida Statutes 10. Name and Address of New R	Yes	<u> </u>
MC		irent negistered Agent		81	Name	10. Name and Address of New F	egistered M	gent
	HMAN, MICHAEL R. 3 W. Cypress Street, Ste	. R.3						
	PA FL 33607	110	82 Street Add			ress (P.O. Box Number is Not Accepta	able)	
				83		· · · · · · · · · · · · · · · · · · ·		
				84	City		FL	85 Zip Code
office or re agent. I ar SIGNATURE	o the provisions of Sections 607 ogistered agent, or both, in the S in familiar with and accept the o	tate of Florida. Such cha bligations of, Section 607	nge was aut 7.0505, Florid	thorized by t da Statutes.	the corporal	coration submits this statement for the tion's board of directors. I hereby acc red when reinstating)	purpose of ept the appo	changing its registered intment as registered
12.		AND DIRECTORS		13.	org. id. dr o redon	ADDITIONS/CHANGES TO OFF		DIRECTORS IN 12
TITLE	DPS DELETE		1.1 TITLE				Change Addition	
NAME	WICHMAN, MICHAEL R.			1.2 NAME				
STREET ADDRESS	5523 W. CYPRESS STREE	t, ste. R-3	•	1.3 STREET A	DDRESS			
CITY-ST ZIP	TAMPA FL		SCI CTC	1,4 CITY - ST	-ZIP			Oberes Addition
TITLE	VPT Zinovoy, Michael		DELETE	2.1 TITLE 2.2 NAME			ļ	Change Addition
NAME STREET ADDRESS	5523 W. CYPRESS ST. ST	F.R.s			.Doress			
EITY - ST - ZIP	TAMPA FL	L. 110	1		1			
TITLE			ELETE	2: 4 CITY-ST-ZIP ETE 3:1 TITLE				Change Addition
NAME				3.2 NAME	1			
STREET ADDRESS				3.3 STREET A	DORESS	•		
CITY - ST - Z(P				34 CITY-ST	-ZIP			
TITLE	☐ DELETE		DELETE	4 1 TITLE		LJ Ch		Change Addition
NAME				4 2 NAME				
STREET ADDRESS				43 STREET A				
CITY - S1 - ZIP TITLE			DELETE	4.4 CITY-ST 5.1 TITLE	- ZIP			Change Addition
NAME		<u>.</u>	JEELIE	5.2 NAME				
STREET ADDRESS				5.3 STREET A	DDRESS			
CITY-ST-ZIP				5 4 CITY - ST				
TITLE			DELETE	6.1 TITLE				Change Addition
NAME				6.2 NAME				
STREET ADDRESS				6,3 STREET A	DORESS			
CITY-S1-ZIP				6.4 CITY-ST		···		
information	n indicated on this annual report	or supplemental annual in or the receiver of trust	report is tru ee empower	e and accur red to execu	ate and tha	d in Section 119.07(3)(i), Florida Statu t my signature shall have the same le rt as required by Chapter 607, Florida	nal effect as	if made under nath: that

MIKE WICHMAN/PRESIDENT

1/17/97

(813) 282-8300