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MEMPROFIT CORPORATION ANNUAL REPORT

· 1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

SIGNATURE:

1503034

FILED

May 08 1997 8:00am

Secretary of State

Daytime Phone #

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| ncipal Place of Businoss<br>IERA'S EARFII  |   | · F .  |                                    |  |  |  |                               |                                 |                             |
|--|---|--|------------------------------------|--|--|--|-------------------------------|---------------------------------|-----------------------------|
| LANDEROME BY THE SEA, FL 33308   |   |  |                                    |  | 3. Date Incorporated or Quali  | fied 3a. D.  | ate of Last F                 | Report                          |                             |
| Principal Place of Busines   |   | 2a. Mailing Ac   |                                    |  | <del></del>  | 4. FEI Number<br>65-00 ( 49 80   |                               | h                               | oplied For<br>ot Applicable |
| Suite, Apt. #. etc.  |   | Suite, Apt   | #, etc.                            |  |  | 5. Certificate of Status Desire  | ø 🛘                           | <b>V</b>                        | Additional<br>equired       |
| City & State   | ,   | City & Sta   | ite                                |  |  | Election Campaign Financi     Trust Fund Contribution                      | ng                            |                                 | May Be<br>to Fees           |
| 2(p)   | Country   | Zip 29   | 3                                  | Country<br>30  |  | 8. This corporation has liabilit Florida Statutes                          | y for intangible              | tax under s                     | . 199.032,                  |
|  | nd Address of Curren                                |  |                                    | L  |  | 10. Name and Address of Ne   | w Registered                  | Agent                           |                             |
| ا المحمداء   | 2 4.4   |  |                                    | 81   | Name   |  |                               |                                 |                             |
| HARRY RABINO 4410 BOUGANVILLA  |   | DRIVE  |                                    | 82   | Street Add   | dress (P.O. Box Number is Not Acceptable)                                  |                               |                                 |                             |
| 1 AMFENA   | re by Th  | KE SEAD  | FL 333                             | 308 B3   | <del></del>  |  |                               |                                 |                             |
|  |   |  |                                    | B4   | City   |  | FL                            | .   `                           | Code                        |
| Pursuant to the provisior<br>office or registered ager   | ns of Sections 617.050<br>nt, or both, in the State | 2 and 617.1508, Florida, Such of                       | lorida Statute:<br>hange was au    | s, the above<br>ithorized by   | -named corp  | poration submits this statement for<br>tion's board of directors. I hereby | the purpose of accept the app | f changing i                    | ts registere<br>registered  |
|  |   |  |                                    |  |  |  |                               | / ~/ /                          | _                           |
| 14-A A A A   | and account the obliga                              | trons of, Section 6                                    | 120013, Flori                      | ida Statutes   |  | •  | රැ                            | 12/9                            | ィラ                          |
| SNATURE HOW  | and accopy the obligation                           | w  |                                    |  |  | ired when reinstaling)   | JATY DATY                     | 5/9                             | 7                           |
| SNATURE Haw<br>Signature, typicd or  | st Karly  | nt and little if applicable                            |                                    |  |  |  | DATE                          | 5/9                             | <u> </u>                    |
| SIgnature, typed or  | plied named registered (for                         | nt and life if applicable D DIRECTORS                  |                                    | Registered Ager  |  | ired when reinstating)   | DATE                          | 5/9                             | RS IN 12                    |
| SNATURE HAW<br>Signature, typical or<br>PRES.  | OFFICERS AND  | nt and little if applicable D DIRECTORS                | (NÖTE:                             | Registered Ager  |  | ired when reinstating)   | DATE                          | D DIRECTO                       | RS IN 12                    |
| INATURE Signalure, typed or  PRES.  E HAPPY E1 ADDRESS HAPPY   | OFFICERS AND  RABINO  CATINITAL                     | nt and lute of applicable D DIRECTORS DRIVE            | (NOTE:                             | Registered Ager 13. 1.1 THTLE 1.2 NAME 1.3 STREET  | nt signature requi   | ired when reinstating)   | DATE                          | D DIRECTO                       | RS IN 12                    |
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