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 #
1. Corporation Name

K31783

(9)

MACLEAN IMPORTS, INC.

Principal Place of Business

Mailing Address

FILED Jan 29 1998 8:00am Secretary of State



7/7 N.W. 72NO AVE. S.H. 2-A-7 MIAMI FL 33126		7/7 N.W. 72ND RVE. S.H. 2-A-7 MIAMI FL 33128					
					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
					08/25/1988		
	Principal Place of Business 2a. Mailing Address				4. FEI Number	Applied For	
21		26			65-0072840	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			I E Contitionto at Statue Decirod I I I 7 7 1	5. Certificate of Status Desired \$8.75 Additional Fee Required	
City & Stat	· • • • • • • • • • • • • • • • • • • •				6. Election Campaign Financing \$5	.00 May Be	
23		28				Ided to Fees	
Zip	Country	Zιρ	Cour	itry	8. This corporation owes or has paid the current ye	ar Intangible	
24	25		30		Personal Property Tax due June 30. Yes	□ No	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent		
	MACLEAN, DAN R			81 Name			
777 NW 72ND AVE. S.R. 2-A-7				82 Street Address (P.O. Box Number is Not Acceptable)			
MIAMI FL 33126							
			Ţ.	B3			
			H	84 City	85	Zip Code	
			1	Olly	FL °°	zip code	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	s, the ab	ove-named	corporation submits this statement for the purpose of chang	ing its registered	
office or agent. I a	registered agent, or both, in the State i am fa miliar with, and accept the obliga	of Florida. Such change was a tions of, Section 607,0505, Flo	utnorized rida Statu	by the con ites.	poration's board of directors. I hereby accept the appointmen	nt as registered	
SIGNATURE							
SIGNATURE	Signature, typed or printed name of registered agen		Registered	Agent signature	e required when reinstating) DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECT	CTORS IN 12	
TIŢĿĔ	PD	DELETE	1.1 111	E	L] Cha	inge L Addition	
NAME	MACLEAN, DAN R.		1.2 NA	AE			
STREET ADDRESS	777 N.W. 72ND AVE. S.R2-	A-7	1.3 STF	EE1 ADURESS			
CITY-ST-ZIP	MIAMI FL		1.4 CIT	r-ST-ZIP			
TITLE	VO	☐ DELETE	2.1 TIT	E	MACKEAN, NORMA	inge Addition	
NAME	MACLEAN, NORMAN J.		2.2 NAI	AE.	MORENT, NOICHIN		
STREET ADDRESS	777 N.W. 72ND AVE S.R2-A	\-7	2.3 STR	EET ADDRESS	Cano		
CITY-ST-ZIP	MIAMI FL		2.4 CIT	Y-ST-ZIP			
TITLE	STD	☐ DELETE	3.1 TITU	F	Cha	inge 🔲 Addition	
NAME	VOGEL, AMI R.		3.2 NA	AE .			
STREET ADDRESS	777 N.W. 72ND AVE S.R2-A	\-7	33 STF	EET ADDRESS			
CITY-ST-ZIP	MIAMI FL		3.4. CIT	Y-ST-ZIP			
TITLE		DELETE	4 1 T/T(E	□ Cha	inge 🔲 Addition	
NAME			4. 2 NA	ME			
STREET ADDRESS			4.3 STR	EET ADDRESS			
CITY-ST-ZIP			4.4 CIT	r-ST-ZIP			
TITLE		DELETE	5.1 TITL	F	☐ Cha	nge 🔲 Addition	
NAME			5.2 NAM	¶E.			
STREET ADDRESS			5.3 STR	EET ADDRESS			
CITY-ST-ZIP			5.4 CIT	f - \$1 - ZIP			
TITLE		DELETE	6.1 TiTL		Cha	nge 🔲 Addition	
NAME			6.2 NAM	ME.			
STREET ADDRESS			6.3 \$18	EE1 ADDRESS			
CITY-ST-ZIP			6.4 CIT	r-ST-ZIP			
14. I hereby	certify that the information supplied wit	h this filing does not qualify for	r the exer	nption state	ed in Section 119.07(3)(i), Florida Statutes. I further certify that	t the information	
	on this annual report or supplemental director of the corporation or the recei or Block 13 if changed, or on an attaction of the corporation of th		rate and xecute th	mat my sig is report as	gnature shall have the same legal effect as if made under oat s required by Chapter 607, Florida Statutes; and that my nam	n; that I am an e appears in	