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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90090 018 ***150.00

	OCUMENT	#	K31	783
4	Cornoration Name			

MACLEAN IMPORTS, INC.

Principal	Place	of	Business

Mailing Address

777 N.W. 72ND AVE. S.R. 2-A-7

777 N.W. 72ND AVE, S.R. 2-A-7



MIAMI FL 33126	MIAMI FL 33126		DO NOT WRITE IN THIS SPACE					
			3. Date Incorporated or Qualifed 08/25/1988					
2. Principal Place of Business	2a. Mailing Address		4, FEI Number	Applied For				
21	26		65-0072840	Not Applicable				
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required				
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees				
Zip Country		untry	This corporation owes the current year Inta Personal Property Tax.	ngible □Yes □No				
9. Name and Address of Curre	ent 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		83						
		84 City	FL	85 Zip Code				

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.

3								
SIGNATURE	Signature, typed or printed name of registered agent and title it	f apolicable. (NOTE: F	egistered Agent signature	equired when reinstating)		DATE		——
12.	OFFICERS AND DIRE		13.		HANGES TO C	OFFICERS AN	ID DIRECTO	
TITLE	PD	☐ DELETE	1.1 TITLE	PO, ST	<u>م</u>	<u> </u>	☐ Change	Addition
NAME	MACLEAN, DAN R.		1.2 NAME	MACLEA	ر لار لار	AVE	- مے د	200
STREET ADDRESS	777 N.W. 72ND AVE. S.R2-A-7		1.3 STREET ADDRESS	777 NU	المسلم ل	, me	- 5/4 0	
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP	milani	EL	<u> 33 </u>		
TITLE	VD	☐ DELETE	2.1 TTTLE	}	<i>C</i> . –		Change	☐ Addition
NAME	MACLEAN NORMA		2.2 NAME	•				
STREET ADDRESS	777 N.W. 72ND AVE S.R2-A-7		2.3 STREET ADDRESS			=		
CITY-ST-ZIP	MIAMI FL		2. 4 CITY-ST-ZIP					
TITLE	STD	DELETE	3.1 TITLE				☐ Change	☐ Addition
NAME	VOGEL, AMI R.	- •	3.2 NAME					Į
STREET ADDRESS	777 N.W. 72ND AVE S.R2-A-7		3.3 STREET ADDRESS					İ
CITY-ST-ZIP	MIAMI FL		3.4 CITY-ST-ZIP					
TITLE		☐ DELETE	4.1 TITLE				☐ Change	Addition
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET ADDRESS					
CITY-ST-ZIP			4.4 CITY-ST-ZIP					
TITLE		☐ DELETE	5.1 TITLE				Change	Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET ADDRESS					
CITY-ST-ZIP			5.4 CITY-ST-ZIP		<u> </u>			
TITLE		☐ DELETE	6.1 TITLE				☐ Change	Addition
NAME			6.2 NAME					j
STREET ADDRESS			6.3 STREET ADDRESS					}
OVD (OT 71D	1		6.4 CITY-ST-ZIP	l				

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 if charged, or on an attachment with an address, with all other like empowered.

SIGNATURE: