FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00				FILED	
PROFIT CORPORATION ANNUAL REPORT 1998	RPORATION JAL REPORT		MENT OF STATE Mortham of State RPORATIONS	May 13 1998 8:00an Secretary of State	
DOCUMENT # 1. Corporation Name MERIDIAN VALLEY (K36620	(8)			
Principal Place of Business 3111 STIRLING RD. 51. LAUDERDALE FL 33312 US Mailing Address 3111 STIRLING RD. 51. LAUDERDALE FL 33312 US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
2. Principal Place of Business	}	2a. Mailing Address		10/03/1988 4. FEI Number NOT APPLICABLE	Applied For Not Applicable
Suite, Apt. #, etc		Suite, Apt #, etc. 277		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	Country	City & State	Country	Election Campaign Financing Trust Fund Contribution This corporation owes or has paid the cu	\$5.00 May Be Added to Fees
26	Address of Current Re	9 3		Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes No
RUBINSTEIN, ROBERT 3111 STIRLING ROAD FORT LAUDERDALE FL 33312			63	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83	
Pursuant to the provisions office or registered agent, agent. I am familiar with, at SIGNATURE	Lewis.	V TEL	SCHIP	poration submits this statement for the purpose of tion's board of directors. I hereby accept the ap	es Zip Code of changing its registered pointment as registered
12.		Me d'applicable (NOTE) RECTORS	Registered Agent signature requ	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE PS SCHIFF, TEI PO BOX 124 MONTAGUE	13 N/A	DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		Change Addition
TITLE NAME STREET ADDRESS		☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	, :-	Change Addition
CITY-ST-ZIP TITLE		DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		Change Addition

CITY-ST-ZIP 6.4 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 receives 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 changed or on an attachment with an oddress.

3.2 NAME

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

3.3 STREET ADDRESS

4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

HAME STREET ADDRESS

TITLE NAME

TITLE

NAME

ZED SCHIFF PRESIDENT 4/299 (993-293-763)

Change

Change

___ Addition

Addition

☐ Change ☐ Addition