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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra R. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K76516

(9)

MASEL CORP.

FILED Apr 08 1998 8:00am Secretary of State



Principal Place	of Busines	s	Mail	ing Address							
5000 N. OCEAN BLVD				O N. OCEAN BLVD							
SUITE 301 FORT LAUDERDALE FL 33308				ITE 301	00000		DO NOT W	DO NOT WRITE IN THIS SPACE			
			FO	RT LAUDERDALE FI	. 33308						
							3. Date Incorporated or Quali	TIEC		l	
					-,		03/27/1989		1 7	F 15	
2. Principal Place of Business			├ ─¬	Mailing Address			4. FEI Number		_ 	oplied For	
21			26				65-0107320	<u> </u>		t Applicable	
Suite, Apt.	#, etc		 	Suite, Apt. #, etc.			5. Certificate of Status Desired	a 🔲	\$8.75		
22			27						Fee Re	 -	
City & State	9		<u> </u>	City & State			6. Election Campaign Financi		\$5.00		
23				28			Trust Fund Contribution		Added 1		
Zip	Country			Zıp Coun		ntry	8. This corporation owes or has paid to		~		
24		25	29		30		Personal Property Tax due			No	
	9. Name	and Address of Cu	rrent Registe	red Agent			10. Name and Address of Ne	w Registered Ag	jent		
WE	INBLATT,	MARTIN				81 Name	ENBLATT MARTI	m 2		į.	
500	O N. OCE	an BlvD					Address (P.O. Box Number is Not Acc	entable)			
SUITE #301						95	80 WELDON CIRC	#	311		
FORT LAUDERDALE FL 33308						83	,	-			
'0	INI DAODE	HUNCE I E 00000									
						84 <u>Civ</u>	4.4.00			Code	
				- 4500 FI O		1/1/	MAKAC	the number of o	panaina i	321-09	
11. Pursuant t	to the provis	sions of Sections 607 dent, or both, in the \$.ບຣບ2 and 60/ Male of Florida	7.1508, Florida Sta a. Such change wa	tutes, the at is authorized	oove-named d by the corr	poration's board of directors. I hereby	accept the appoi	nanging it ntment as	registered	
agent. I ai	m familiar w	ith, and accept this	oligations of.	Section 607.0505,	Florida Stat	utes.	corporation submits this statement for poration's board of directors. I hereby	2/-	ular	·/	
SIGNATURE	111	11/2	////	The state of				3/2	7/98		
DIGHATORE	Signature, Who	of fortune has been some			Off Registered	d Agent signature	required when reinstating)	DATE	7		
12.		OFFICERS	AND DIRECT		13.		ADDITIONS/CHANGES TO				
TITLE	D			☐ DELETE	1.5 TO	TLE	D		Change	☐ Addition	
NAME	WEINB	latt, Martin			1.2 N	ME	WEINBLATT MAR	CI/N		Į:	
STREET ADDRESS 5000 N. OCEAN BLVD #301					1.3 \$1	REET ADDRESS	9580 WELDON CIR	eve Tra	M		
CITY-ST-ZIP	FORT L	auderdale fl			1.4 CI	TY-ST-ZIP	TAMARAC FL 3	3321-09	81		
TITLE				☐ DELETE	2.1 TI				Change	Addition	
NAME					2.2 NAME						
STREET ADDRESS						REET ADDRESS					
						ITY-ST-ZIP					
CITY-ST-ZIP				DELETE	3.1 TI			· · · · · · · · · · · · · · · · · · ·	Change	Addition	
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NAME					3.2 N/						
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STREET ADDRESS					4.3 ST	REET ADDRESS	1			ļ	
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NAME					52 N					l	
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					1						
CITY-ST-ZIP		· <u>-</u>		DELETE		TY-ST-ZIP		r	Change	☐ Addition	
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NAME					6.2 N						
STREET ADDRESS					6.3 S	TREET ADDRESS					
CATY + ST - ZIP					6.4 C	TY-ST-ZIP	<u> </u>				

14. Thereby certify that the information supplied with this filling 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 changed, or on an attachment with an address.

SIGNATURE:

Mista Mind Pres

03/24/98

(954) 118-1458