## 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

## **FILED** May 01 1998 8:00am Secretary of State

1. Corporation	MENI # K//16 MERICA, INC.	1 (3)				TOTAL AND LAND COMPANY STATE OF THE STATE OF
!						(11)
Principal Place	e of Business	Mailing Address			-   1	SENTE BENTE MENDES AND IT SANT
1995 W. COMMERCIAL BLVD. STE. B 1995 W. COMMERCIAL BLVD						
FT. LAUDERDALE FL 33309 STE L US FT. LAUDERDALE FL 33309					DO NOT WRITE IN THIS SPACE	
•			••••		3. Date Incorporated or Qualified	
					04/03/1989	
2. Principal Place of Business 2a. Mailing			Address		4. FEI Number	Applied For
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.					65-0115620	Not Applicable
22 27					5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	0	City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zιρ	Country		8. This corporation owes or has paid the	<b>44</b> ' — '
24	9, Name and Address of Curre	nt Registered Agent	30		Personal Property Tax due June 30.  10. Name and Address of New Registers	Yes No
SU	ITH, GREGORY D	it riegistered Agent	8	1 Name	10. Hanne Bito Addison of 1464 (16818to)	an Agoin
	95 W COMMERCIAL BLVD		i	D Chron Add	(20 De Nimber & Met Assentable)	
	E. L		•	Street Add	ress (P.O. Box Number is Not Acceptable)	
FT. LAUDERDALE FL 33309			8	3		
			8	4 City		85 Zip Code
					F	·L   ·
11. Pursuant i	to the provisions of Sections 607.050 egistered agent, or math, in the State	J2 and 607.1508, Florida Stat e of Florida Such change was	utes, the abo s autborized i	ove-named corp by the corpora	poration submits this statement for the purposition's board of directors. I hereby accept the a	e of changing its registered appointment as registered
	m familiar with an accept the oblig	ations of Section 607,0505,	Florida Statut	es.		
SIGNATURE	Signate Typed or printed arms of a gistered age	eu au pile i' applicable (No	OTF: Registered A	igent signature requi	red when reinstating) DA18	
12.	OF ICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	PVTDV	DELETE	1.1 TITLE			☐ Change ☐ Addition
NAME	SMTIH, GREGORY D		1.2 NAM	_		
STREET ADDRESS	ET LAUDEDDALE EL 2000			ET ADDRESS		ٳ
CITY-ST-ZIP TITLE	FI DADDENDALE PL 33308	DELETE	1.4 City - 2.1 Title			Change Addition
NAME			2.1 HILE 2.2 NAMI			C Change C Addition
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP	· 1			-S1-ZIP		
TITLE			3.1 TITLE			☐ Change ☐ Addition
NAME	32 N		3.2 NAMI	E		
STREET ADDRESS	!			ET ADDRESS		
CITY-ST-ZIP				- ST - ZIP		Change Addition
TITLE NAME		☐ DELETE	4.1 TITLE 4.2 NAM			Change
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP	, , , , , , , , , , , , , , , , , , ,		4.4 CITY	1		
TITLE		☐ DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME	E (		
STREET ADDRESS			5.3 STRE	ET ADDRESS		
CITY-ST-ZIP			5.4 City-			
TITLE		☐ DELETE	6.1 TITLE	ì		Change Addition
NAME			6.2 NAME			
STREET ADDRESS			1	ET ADORESS		(
14. I hereby c	ertify that the information supplied w	rith this filing does not qualify	for the exem		Section 119.07(3)(i), Florida Statutes. I further	certify that the information
indianiad	on this annual capact or europlaments	al annual toport is true and a	courses and t	hat my signatu	ire chall have the same lengt effect as if made	under eath, that I am an

and accurate and that my signature shall have the same legal effect as it made under oath; that I am all ered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in