

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

0051295

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

98 JUL 15 PM 12:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # L99772 (0)

1. Corporation Name
M2, INC.

Principal Place of Business
13966-B SW 46TH TERRACE
MIAMI FL 33175
US

Mailing Address
13966-B SW 46TH TERRACE
MIAMI FL 33175
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

3. Date Incorporated or Qualified

09/13/1990

4. FEI Number

65-0215051

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JONES, CHARLES L.
9900 SW 168TH ST SUITE 9
MIAMI FL 33157

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

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, am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME
GILSTAD, LARRY M
STREET ADDRESS
13966-B SW 46TH TERRACE
CITY-ST-ZIP
MIAMI FL

☐ DELETE

TITLE

NAME
GILSTAD, ANTONIA M
STREET ADDRESS
13966-B SW 46TH TERRACE
CITY-ST-ZIP
MIAMI FL

☐ DELETE

TITLE

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13966-B SW 46TH TERRACE
CITY-ST-ZIP
MIAMI FL

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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 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: *Antonina M. Gilstad* ANTONIA M. GILSTAD 7/9/98 305-553-0259
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/98)

M², Inc.

VIDEO PRODUCTION SERVICE

July 9, 1998

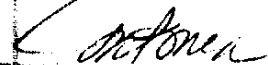
Sandra B. Mortham
Secretary of State
Division of Corporations
Annual Reports Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Dear Ms. Mortham:

I was this week in receipt of the 1998 Profit Corporation Annual Report packet '2nd Notice'. It unfortunately arrived the same day as my father left after traveling here from Idaho to be with me for my fifth chemotherapy treatment. Boy were there tears that night!

I have enclosed a copy of my company's newsletter that provides an overall view of my life in the last six months. I do not remember receiving the '1st Notice' and can only imagine that it was mistakenly overlooked. I am enclosing a check for the Annual Report and Corporation Supplemental Fees and ask that you kindly accept this payment and forgo the additional penalty in lieu of my medical condition. I will gladly provide complete medical documentation if you require it.

Sincerely,



Antonea M. Gilstad
Vice President / Secretary

RECEIVED

JUL 10 1998

TAXPAYER SERVICES
PROCESS