

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION,
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Murphree
TALLAHASSEE, FLORIDA 32399-0001
(904) 412-1000

DOCUMENT # M22438

(9)

MIKANTO DEVELOPMENT CORPORATION

APPROVED
FILED

95 MAY -1 1995 9:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Office Address: 7425 S.W. 42ND ST
MIAMI FL 33155
Mailing Address: 7425 S.W. 42ND ST
MIAMI FL 33155

Use report where it fits. SPACE

3. Date the report due (12 months)	3a. Date of Last Report
10/24/1985	04/18/1994
4. File Number	Applied For
59-2429705	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
☐	
6. Election Campaign Contribution	\$5.00 May Be Added to Fees
☐	
7. The corporation is a subsidiary of a corporation organized under the laws of the State of Florida	Yes ☐ No ☐

2. Principal Office Address	2a. Mailing Address
21. State of Incorporation	26. State of Incorporation
22. City & State	27. City & State
23. City & State	28. City & State
24. City & State	29. City & State
25. City & State	30. City & State

9. Name and Address of Current Registered Agent

ESTEVEZ, MICHAEL
7425 S.W. 42ND ST.
MIAMI FL 33155

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (if O. Box Number is Not Acceptable)	
83. City	
84. City	FL

11. I, the undersigned, the person named in Sections 607.01(2) and 607.15(2)(b), Florida Statutes, the officer named corporation submits the statement for the purpose of changing its registered office as indicated in the report on the State of Florida. Such change was authorized by the corporation's Board of Directors, or by the appointment of a registered agent. I am familiar with and accept the obligations of Section 607.01(2)(b), Florida Statutes.

Subscribed:

Signature of Officer or Director

Signature of Registered Agent

DATE

12. OFFICERS AND DIRECTORS	13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS																																																																																										
<table border="1"><tr><td>NAME</td><td>P. MURPHY, LINDA</td></tr><tr><td>STREET ADDRESS</td><td>7425 S.W. 42ND ST.</td></tr><tr><td>CITY</td><td>MIAMI FL</td></tr><tr><td>NAME</td><td>VP BARBELLA, NICHOLAS</td></tr><tr><td>STREET ADDRESS</td><td>7425 S.W. 42ND ST.</td></tr><tr><td>CITY</td><td>MIAMI FL</td></tr><tr><td>NAME</td><td>ST ESTEVEZ, MICHAEL</td></tr><tr><td>STREET ADDRESS</td><td>7425 SW 42 ST</td></tr><tr><td>CITY</td><td>MIAMI FL</td></tr><tr><td>NAME</td><td></td></tr><tr><td>STREET ADDRESS</td><td></td></tr><tr><td>CITY</td><td></td></tr><tr><td>NAME</td><td></td></tr><tr><td>STREET ADDRESS</td><td></td></tr><tr><td>CITY</td><td></td></tr><tr><td>NAME</td><td></td></tr><tr><td>STREET ADDRESS</td><td></td></tr><tr><td>CITY</td><td></td></tr></table>	NAME	P. MURPHY, LINDA	STREET ADDRESS	7425 S.W. 42ND ST.	CITY	MIAMI FL	NAME	VP BARBELLA, NICHOLAS	STREET ADDRESS	7425 S.W. 42ND ST.	CITY	MIAMI FL	NAME	ST ESTEVEZ, MICHAEL	STREET ADDRESS	7425 SW 42 ST	CITY	MIAMI FL	NAME		STREET ADDRESS		CITY		NAME		STREET ADDRESS		CITY		NAME		STREET ADDRESS		CITY		<table border="1"><tr><td>1. NAME</td><td></td><td>☐ Change ☐ Addition</td></tr><tr><td>2. STREET ADDRESS</td><td></td><td></td></tr><tr><td>3. CITY</td><td></td><td></td></tr><tr><td>4. NAME</td><td></td><td>☐ Change ☐ Addition</td></tr><tr><td>5. STREET ADDRESS</td><td></td><td></td></tr><tr><td>6. CITY</td><td></td><td></td></tr><tr><td>7. NAME</td><td></td><td>☐ Change ☐ Addition</td></tr><tr><td>8. STREET ADDRESS</td><td></td><td></td></tr><tr><td>9. CITY</td><td></td><td></td></tr><tr><td>10. NAME</td><td></td><td>☐ Change ☐ Addition</td></tr><tr><td>11. STREET ADDRESS</td><td></td><td></td></tr><tr><td>12. CITY</td><td></td><td></td></tr><tr><td>13. NAME</td><td></td><td>☐ Change ☐ Addition</td></tr><tr><td>14. STREET ADDRESS</td><td></td><td></td></tr><tr><td>15. CITY</td><td></td><td></td></tr><tr><td>16. NAME</td><td></td><td>☐ Change ☐ Addition</td></tr><tr><td>17. STREET ADDRESS</td><td></td><td></td></tr><tr><td>18. CITY</td><td></td><td></td></tr></table>	1. NAME		☐ Change ☐ Addition	2. STREET ADDRESS			3. CITY			4. NAME		☐ Change ☐ Addition	5. STREET ADDRESS			6. CITY			7. NAME		☐ Change ☐ Addition	8. STREET ADDRESS			9. CITY			10. NAME		☐ Change ☐ Addition	11. STREET ADDRESS			12. CITY			13. NAME		☐ Change ☐ Addition	14. STREET ADDRESS			15. CITY			16. NAME		☐ Change ☐ Addition	17. STREET ADDRESS			18. CITY		
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14. I, the undersigned, certify that the information supplied with this filing is substantially true and correct and that the corporation is in compliance with the provisions of the Florida Statutes. I further certify that the information is filed for the annual report of the corporation and that the corporation is in compliance with the provisions of the Florida Statutes. I am familiar with and accept the obligations of the Florida Statutes and that my signature shall have the same legal effect as if made under oath. This report is filed for the corporation of the State of Florida and is subject to the report as required by Chapter 607, Florida Statutes, and that my signature is subject to the provisions of Chapter 607, Florida Statutes.

SIGNATURE:

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

NICHOLAS J. BARBELLA

5-3-95 305-266-5720