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

DOCUMENT # M82629 (0)

MEFAS CORPORATION

FILED Apr 27 1998 8:00am Secretary of State

Principal Place of Business Mailing Address				BIOTH BANK! BIRIL DIDIL IDDI		
C/O ROBERT E. ALBURY. JR. 1740 S.W. B3RD COURT MIAMI FL 33155		C/O ROBERT E. ALBURY. JR. 1740 S.W. B3RD COURT MIAMI FL 33155		DO NOT WRITE IN THIS S	SPACE	
					3. Date Incorporated or Qualified	
					05/16/1988	
	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			65-0052799	Not Applicable
Suite, Apt.		27	<u> </u>		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	9	City & State	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
} Zip	Country	Zip	Cour	etry	8. This corporation owes or has paid the cur	rent year Intangible
24	25	29	30			
ļ	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registered	Agent
	Bury, robert e., Jr.			81 Name		İ
1740 S.W. 83RD COURT			82 Street Address (P.O. Box Number is Not Acceptable)			
MIF	MI FL 33155			B3		
			-	84 City		85 Zip Code
					FL	
office or re agent. I at SIGNATURE	egistered agent, or both, in the Stat m familiar with, and accept the oblig	e of Florida, Such change was a gations of, Section 607.0505, Fl	authorized orida Stati	by the corpora	poration submits this statement for the purpose of tion's board of directors. I hereby accept the app	changing its registered ointment as registered
12.	Signature, typical or printed number of registered as OF LICERS AT	ND DIRECTORS	13.	Agent signature requi	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	PS	DELETE	1.1 10	£ T	TABOTHOROGOTO MAGES TO GETT SELECTIONAL	☐ Change ☐ Addition
NAME	GOLL, STUART H		1.2 NA			[
STREET ADDRESS	C/O 1740 SW 83RD CT.			EET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33155		1.4 CIT	Y-ST-ZIP		
TITLE	V	DELETE	2.1 TIT			☐ Change ☐ Addition C
NAME	GOLL, RAMIRO A		2.2 NA	ME		
STREET ADDRESS	C/O 1740 SW 83RD CT.		2.3 STf	EE1 ADDRESS		
CITY-ST-ZIP	MIAMI FL 33155		2. 4 CI	Y-ST-ZIP		
TITLE	T	DELETE	3.1 1(1	.£		Change Addition
NAME	GOLL, ANDREW J		3.2 NA	ME .		
STREET ADDRESS	C/O 1740 SW 83RD CT.		3.3 ST#	REET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33155		3.4 CF	Y-S1-ZIP		
TITLE	1	☐ DELET e	4.1 T(T	.ŧ		Change Addition
NAME	ALBURY, ROBERT E JR		4. 2 NA	ME		
STREET ADDRESS	C/O 1740 SW 83RD CT.		4.3 \$16	EE1 ADDRESS		
CITY-ST-ZIP	MIAMI FL 33155	<u>.</u>	4.4 CIT	Y-ST-ZIP		
TITLE		☐ DELETE	5.1 1(1	.E		☐ Change ☐ Addition
NAME			5.2 NAI	VE		
STREET ADDRESS			5.3 STF	EET ADDRESS		
CITY-ST-ZIP			5.4 CIT	Y-ST-ZIP		
TITLE		☐ DELETE	6.1 111	.F		Change
NAME			6.2 NAI	NE		
STREET ADDRESS			6.3 STF	EET ADDRESS		
CITY-ST-ZIP			6.4 CIT	Y-ST-ZIP		

14. Thereby 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 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 trusted 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.