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FILED
Mar 02, 1999 8:00 am
Secretary of State

03-02-1999 90071 031 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N98000003302			
1. Corporation Name MASH.O. INC.			
Principal Place of Business 2491 HOMEWOOD ROAD WEST PALM BEACH FL 33408		Mailing Address 2491 HOMEWOOD ROAD WEST PALM BEACH FL 33408	
2. Principal Place of Business 21 Suite, Apt. #, etc. City & State Zip Country		25. Mailing Address 25 Suite, Apt. #, etc. City & State Zip Country	
21 22 23 24		25 26 27 28 29 30	
3. Date Incorporated or Outfitted 08/05/1998		4. FEI Number Applied For N98000003302	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
7. Name and Address of Current Registered Agent RYAN, JAMES D 11891 US HWY ONE STE 201 NO PALM BEACH FL 33408		10. Name and Address of New Registered Agent	
81 Name 82 Street Address (P.O. Box Number Is Not Acceptable) 83 84 City FL Zip Code		11. Pursuant to the provisions of Sections 617.0602 and 617.1506, 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. I am familiar with, and accept the obligations of Section 617.0603, Florida Statutes.	
SIGNATURE <i>Daphne Grad</i> DATE <i>Jan 11, 99</i>		SIGNATURE <i>Daphne Grad</i> DATE <i>Jan 11, 99</i>	
12. OFFICERS AND DIRECTORS ☐ DELETE		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ Change ☐ Addition	
12.1 TITLE 12.2 NAME 12.3 STREET ADDRESS 12.4 CITY-ST-ZIP		13.1 TITLE 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY-ST-ZIP	
12.5 TITLE 12.6 NAME 12.7 STREET ADDRESS 12.8 CITY-ST-ZIP		13.5 TITLE 13.6 NAME 13.7 STREET ADDRESS 13.8 CITY-ST-ZIP	
12.9 TITLE 12.10 NAME 12.11 STREET ADDRESS 12.12 CITY-ST-ZIP		13.9 TITLE 13.10 NAME 13.11 STREET ADDRESS 13.12 CITY-ST-ZIP	
12.13 TITLE 12.14 NAME 12.15 STREET ADDRESS 12.16 CITY-ST-ZIP		13.13 TITLE 13.14 NAME 13.15 STREET ADDRESS 13.16 CITY-ST-ZIP	
12.17 TITLE 12.18 NAME 12.19 STREET ADDRESS 12.20 CITY-ST-ZIP		13.17 TITLE 13.18 NAME 13.19 STREET ADDRESS 13.20 CITY-ST-ZIP	
12.21 TITLE 12.22 NAME 12.23 STREET ADDRESS 12.24 CITY-ST-ZIP		13.21 TITLE 13.22 NAME 13.23 STREET ADDRESS 13.24 CITY-ST-ZIP	
12.25 TITLE 12.26 NAME 12.27 STREET ADDRESS 12.28 CITY-ST-ZIP		13.25 TITLE 13.26 NAME 13.27 STREET ADDRESS 13.28 CITY-ST-ZIP	
12.29 TITLE 12.30 NAME 12.31 STREET ADDRESS 12.32 CITY-ST-ZIP		13.29 TITLE 13.30 NAME 13.31 STREET ADDRESS 13.32 CITY-ST-ZIP	
12.33 TITLE 12.34 NAME 12.35 STREET ADDRESS 12.36 CITY-ST-ZIP		13.33 TITLE 13.34 NAME 13.35 STREET ADDRESS 13.36 CITY-ST-ZIP	
12.37 TITLE 12.38 NAME 12.39 STREET ADDRESS 12.40 CITY-ST-ZIP		13.37 TITLE 13.38 NAME 13.39 STREET ADDRESS 13.40 CITY-ST-ZIP	
12.41 TITLE 12.42 NAME 12.43 STREET ADDRESS 12.44 CITY-ST-ZIP		13.41 TITLE 13.42 NAME 13.43 STREET ADDRESS 13.44 CITY-ST-ZIP	
12.45 TITLE 12.46 NAME 12.47 STREET ADDRESS 12.48 CITY-ST-ZIP		13.45 TITLE 13.46 NAME 13.47 STREET ADDRESS 13.48 CITY-ST-ZIP	
12.49 TITLE 12.50 NAME 12.51 STREET ADDRESS 12.52 CITY-ST-ZIP		13.49 TITLE 13.50 NAME 13.51 STREET ADDRESS 13.52 CITY-ST-ZIP	
12.53 TITLE 12.54 NAME 12.55 STREET ADDRESS 12.56 CITY-ST-ZIP		13.53 TITLE 13.54 NAME 13.55 STREET ADDRESS 13.56 CITY-ST-ZIP	
12.57 TITLE 12.58 NAME 12.59 STREET ADDRESS 12.60 CITY-ST-ZIP		13.57 TITLE 13.58 NAME 13.59 STREET ADDRESS 13.60 CITY-ST-ZIP	
12.61 TITLE 12.62 NAME 12.63 STREET ADDRESS 12.64 CITY-ST-ZIP		13.61 TITLE 13.62 NAME 13.63 STREET ADDRESS 13.64 CITY-ST-ZIP	
12.65 TITLE 12.66 NAME 12.67 STREET ADDRESS 12.68 CITY-ST-ZIP		13.65 TITLE 13.66 NAME 13.67 STREET ADDRESS 13.68 CITY-ST-ZIP	
12.69 TITLE 12.70 NAME 12.71 STREET ADDRESS 12.72 CITY-ST-ZIP		13.69 TITLE 13.70 NAME 13.71 STREET ADDRESS 13.72 CITY-ST-ZIP	
12.73 TITLE 12.74 NAME 12.75 STREET ADDRESS 12.76 CITY-ST-ZIP		13.73 TITLE 13.74 NAME 13.75 STREET ADDRESS 13.76 CITY-ST-ZIP	
12.77 TITLE 12.78 NAME 12.79 STREET ADDRESS 12.80 CITY-ST-ZIP		13.77 TITLE 13.78 NAME 13.79 STREET ADDRESS 13.80 CITY-ST-ZIP	
12.81 TITLE 12.82 NAME 12.83 STREET ADDRESS 12.84 CITY-ST-ZIP		13.81 TITLE 13.82 NAME 13.83 STREET ADDRESS 13.84 CITY-ST-ZIP	
12.85 TITLE 12.86 NAME 12.87 STREET ADDRESS 12.88 CITY-ST-ZIP		13.85 TITLE 13.86 NAME 13.87 STREET ADDRESS 13.88 CITY-ST-ZIP	
12.89 TITLE 12.90 NAME 12.91 STREET ADDRESS 12.92 CITY-ST-ZIP		13.89 TITLE 13.90 NAME 13.91 STREET ADDRESS 13.92 CITY-ST-ZIP	
12.93 TITLE 12.94 NAME 12.95 STREET ADDRESS 12.96 CITY-ST-ZIP		13.93 TITLE 13.94 NAME 13.95 STREET ADDRESS 13.96 CITY-ST-ZIP	
12.97 TITLE 12.98 NAME 12.99 STREET ADDRESS 12.100 CITY-ST-ZIP		13.97 TITLE 13.98 NAME 13.99 STREET ADDRESS 13.100 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)(b), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Daphne Grad* DATE: *Jan 11, 99* 5240870327

CP2E037 (1/98)