## 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 # P12589

(8)

MUZZO BROTHERS GROUP INC.

## FILED May 18 1998 8:00am Secretary of State



					[ [2] [2] [3] [4] [4] [4] [4] [4] [4] [4] [4] [4] [4	<b>:        </b>		
Principal Place		Mailing Address			The state of the s			
130 TORO ROAD   130 TORO ROAD   DOWNSVIEW, ONTARIO   DOWNSVIEW, ONTARIO								
CANADA M3J		GANADA M3J 2A9			DO NOT WRITE IN THIS SPACE	DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified			
					12/18/1986			
	lace of Business	2a. Mailing Address			4. FEI Number Applied			
Suite, Apt.	# oto	Suite, Apl. #, etc.			NOT APPLICABLE Not App			
22	w, etc.	27 Suite, Apr. #, etc.			6. Certificate of Status Desired See Require			
City & State	9	City & State	·		Election Campaign Financing \$5.00 May			
23		28			Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Countr	У	8. This corporation owes or has paid the current year Intangib			
24	25	29	30		Personal Property Tax due June 30. Yes No			
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent			
	NK\$, JEANETTE S.		8		OKIDGES, KOGEK A.			
	200 SOUTH OCEAN DRIVE		62	Street	1 Address (P.O. Box Number is Not Acceptable)			
	e. 110 Ns <b>ën</b> Beach Fl 34957		83	کــــــا	334 MINORCA AVENUE, STE 200			
JEI	19EM DEWON LE 34891		0	1				
			84	City	COPAL GARITO EI 85 Zip Code			
11. Pursuant t	to the provisions of Sections 607 0502	and 607,1508. Florida Stati	utes, the abov	e-named	CORAL GABLES FL 33/3-d corporation submits this statement for the purpose of changing its regi	istered		
office or re	egistered agent or both, in the State of	of Florida. Such change was	authorized b	y the cor	rporation's board of directors. I hereby accept the appointment as regis	tered		
	7	AALA	ionua Statute	75.	4/28198			
SIGNATURE	Signature typed or prised name of registered agen	Land Irle Lapple, ablc (NC	Olf Registered Ac	cel signature	re required when reinstating) DATE			
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN			
TITLE	POS	DELETE	1.1 TITLE		Change	Addition		
NAME	MUZZO, MARCO		1.2 NAME					
STREET ADDRESS	200 SYLVADENE PARKWAY			T ADDRESS				
CHTY-ST-ZIP	WOODBRIDGE ONTARIO	DELETE	1.4 CITY -	ST-ZIP		Addista-		
TITLE	MUZZO, ALEX	רו מברבונ	2.1 TITLE		D   Change   CORRECTION	Addition		
NAME STREET ADDRESS	130 TORO RD		2.2 NAME	T ADDRESS	\ As	•		
CITY+ST-ZIP	DENNSVIEW ON		2.3 STREE		DOWNSVIEW ON			
TITLE		DELETE	3.1 TITLE	o I * CIF		Addition		
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREE	T ADDRESS				
CITY-ST. ZIP			3.4. CITY-					
TITLE		DELETE	41 TITLE		Change	Addition		
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREE	t address				
CITY-ST-ZIP			4.4 CITY-	ST-ZIP				
TITLE		☐ DELETE	5.1 TITLE		Change	Addition		
NAME			5.2 NAME					
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP	<u> </u>	DELETE	5.4 CITY -	ST - ZIP		6.00 alata.		
TITLE	Λ	☐ DELETE	6.1 TITLE		☐ Change	Addition		
NAME OTREET ADDRESS	/	٨	6.2 NAME	T 1000000				
STREET ADDRESS	11	/		T ADDRESS	1			
14   hereby c	ertify that the information supplied with	this bling door not qualify:	6.4 CITY-		ted in Section 119.07(3)(i), Florida Statutes. I further certify that the inform	mation		
indicated	on this annual report or suppler prital	arnual evertis true and ac	curate and the	nat my sig	gnature shall have the same legal effect as if made under oath; that it is no srequired by Chapter 607, Florida Statutes; and that my name appears	nanun nan		
Block 12 c	director of the corporation ontille topell or Block 13 if changed, or on what the	ef or trustre empowered to in opt with an address.	execute this	report as	s required by Chapter 607, Florida Statutes; and that my name appears	in		