## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P93000008201**1. Corporation Name

THE MIGHTY MOUSE CORP

Principal Place of Busin	ness
4 4 E O O A B N C O C A N / E	•
14532 NW 26 AVE	

OPA LOCKA FL 33054

Mailing Address

14532 NW 26 AVE OPA LOCKA FL 33054

## **FILED** Feb 01, 1999 8:00am **Secretary of State**

02-01-1999 90006 040 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

		• •			01/18/1993	· 2*		
2. Principal P	ace of Business	2a. Mailing Address			4. FEI Number	Apr	lied For	
21		26			65-0387641	Not	Applicable	
	Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired  \$8.75 Additional			
22	27				Fee Required			
City & Stat	State City & State				6. Election Campaign Financing \$5.00 May 8e			
23	28				Trust Fund Contribution Added to Fees			
Zip	Country	Zip Country		8. This corporation owes the current year Intangible				
24	25	29 36	0		Personal Property Tax.		□No	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent								
- DINIC	A TODO		81	Name				
DINGA, TODD 14532 NW 26 AVE			82	82 Street Address (P.O. Box Number is Not Acceptable)				
OPA LOCKA FL 33054				property of the second of the				
UPA	LOUIS I'L GOOT		83			12年前於1912	<b>经特殊</b>	
•			84	City	-	85 Zin C		
	e				F		, , , , , , , , , , , , , , , , , , ,	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes, f Florida, Such change was auth	, the above norized by t	e-named co the corpora	rporation submits this statement for the purpose tion's board of directors. I hereby accept the ap	or changing its r pointment as reg	istered	
agent. I a	m familiar with, and a cept the bigation	ons of, Section 607.0505, Florid	a Statutes.					
SIGNATURE	HATTI / Jan					1-99		
	Signature, typed or printed name of registered apoint			t signature requ	ired when reinstating) DATE	AND DIDECTO	30 IN 42	
12.	OFFICERS AND		13.	<del></del>	ADDITIONS/CHANGES TO OFFICERS		Addition	
TITLE	<b>D</b>	☐ DELETE	1.1 TITLE	İ		☐ Change	L_3 Addition	
NAME	DINGA, TODD		1.2 NAME	İ	,	•		
STREET ADDRESS	14532 NW 26 AVE		1.3 STREET	ADDRESS				
CITY-ST-ZIP	OPA LOCKA FL 33054		1.4 CITY-ST	r-ZIP				
TITLE.		☐ DELETE	2.1 TITLE			☐ Change	☐ Addition	
NAME		, ,	2.2 NAME					
STREET ADDRESS	*		2.3 STREET	ADDRESS			·	
CITY-ST-ZIP			2. 4 CITY-S	T-ZiP	<u> </u>	,	·	
TITLE ;	The second secon	☐ DELETE	3.1 TITLE			Change	☐ Addition	
NAME			3.2 NAME	ŀ	•	-		
STREET ADDRESS			3.3 STREET	ADDRESS		1,11	attro-tr	
CITY-ST-ZIP	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		3.4. CITY-S1	T-ZIP		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Y	
TITLE		☐ DELETÉ	4.1 TITLE		***	∴ Change	Addition	
NAME		. •	4. 2 NAME		•		.	
STREET ADDRESS			4,3 STREET	ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST	r-zip				
TITLE		☐ DELETE	5.1 TITLE			☐ Change	☐ Addition	
NAME			5.2 NAME			₹% %	1	
STREET ADDRESS			5.3 STREET	ADDRESS				
CITY-ST-ZIP		•	5.4 CITY-ST	T-Z1P				
TITLE	The Art Law	☐ DELETE	6.1 TITLE			☐ Change	Addition	
NAME	SECTION SECTION	,	6.2 NAME		•			
ſ		•	6.3 STREET	ADDRESS			-	
STREET ADDRESS			6.4 CITY- ST	i				
CITY-ST-ZIP			0.4 0111-01		Carting 440 07(2)(i) Elected Statutes 15 office	cortify that the in	formation	

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, with all other like empowered.

SIGNATURE: