PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P93000013827

1. Corporation Name

FILED Feb 15, 1999 8:00 am Secretary of State 02-15-1999 90012 010 ***158.75

MBI, INC	,) (20)(00) 1/0 (1/01) 1/1/1 (20)((20)((20)((20)((20)((20)((20)((20)	H 86 381 H 888 HH86 HB14	E BIORIO 3000 3000	
Principal Place	of Business	Mailing Address			I IORIIORI IIR IBIAD IIIII BRIII ABIII ABIII	31 OB\$B)		
7243 INTERNATIONAL DRIVE 9533 WICKHAM WAY								
ORLANDO FL 32819 ORLANDO FL 32836					DO NOT WRITE IN	THIS SPACE	•	
US		US			3. Date Incorporated or Qualifed	THIS SI NOL		
					02/24/1993	,		
2. Principal P	Jace of Business	2a. Mailing Address			4. FEI Number	Ar	plied For	٠.
21		26		_	59-3167095		ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		_	5Certifcate of Status Desired		Additional	
22		27					equired	
City & State		— ·	City & State		6. Election Campaign Financing		May Be to Fees	
23	Country	Zip	Count		Trust Fund Contribution 8. This corporation owes the current y		10 Fees	
Zip	Country 25		30	,	Personal Property Tax.	□ Yes	₽No	
24	9. Name and Address of Curre		301		10. Name and Address of New Regis	tered Agent		
			8	1 Name	· ·			
	OS, JOSE		8	2 Street A	ddress (P.O. Box Number is Not Acceptable)			
5381-B HOFFNER AVENUE			ا ا	_ Olloct / ·				
ORL	ANDO FL 32812		8	3		""、多緒鄉		
			. 8	4 City		85 Zip	Code	
		7.4500 51 11 01 14	411-		and the submits this statement for the num	Cee of changing its	registered	
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statute	es, the about the stand h	ve-named c	corporation submits this statement for the purp ration's board of directors. I hereby accept the	appointment as re	gistered	
office or r	edistered agent, or both, in the State	e of Floriga. Such change was at	unionzea b	y trie corpor				
office or r agent. I a	egistered agent, or both, in the State m familiar with, and accept the oblig	ations of, Section 607.0505, Flor	rida Statute	es.				
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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.