May 10, 1999 8:00 am Secretary of State

05-10-1999 90259 034 ***150.00

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 # P93000016067

1. Corporation Name

MICINL	JUSTRIES, INC.						
Principal Place of Business Mailing Address				_	I IBENIES NO VERSE NIN BONI PARTY		
1521 GARDEN RD FT LAUDERDALE FL 33326 FT LAUDERDALE FL 333					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed 02/25/1993		
Principal Place of Business 1		2a. Mailing Address 26			' - 	lied For Applicat	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired		
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution Added to		
Zip	Country 25	Zip 30	Counti	y	This corporation owes the current year Intengible Personal Property Tax. Yes	□No	
	9. Name and Address of Currer	t Registered Agent			10. Name and Address of New Registered Agent		
CURIGER, CHRIS 1521 GARDEN RD FT LAUDERDALE FL 33326			8	2 Street	Name Street Address (P.O. Box Number is Not Acceptable)		
			8	4 City	FL 85 Zip C	ode	
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such change was auff	ionzed b	v ine como	corporation submits this statement for the purpose of changing its roration's board of directors. I hereby accept the appointment as reg	egistere istered	
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE: Re	egistered Ag	ent signature r	required when reinstating) DATE		
12. OFFICERS AND DIRECTORS			13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	RS IN 12	
TITLE	D	☐ DELETE			☐ Change [
NAME	Curiger, Chris		1.2 NAME				
STREET ADDRESS 1521 GARDEN RD			1.3 STRE	ET ADDRESS			
CITY-ST-ZIP FT LAUDERDALE FL 33326			1.4 CITY-	ST-ZIP		_	

Addition Change DELETE 2.1 TITLE TITLE **BOULDER, P** 2.2 NAME 7000 S.W. 130 AVE, BOX 5 2.3 STREET ADDRESS STREET ADDRESS FT LAUDERDALE FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 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)(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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/98)