SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Aug 18 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000074063 (7)

MICAR SERVICES, INC.

Principal Place	of Rueinage	Mailing Address			MALLE IMBEL MINIS MULLA BOLDA BOLDA ATLI INGL	
		14180 ROOSEVELT BLVD.				
14180 ROOSEVELT BLVD. GLEARWATER FL 34621		CLEARWATER FL 34621				
				DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualified 10/26/1993	3a. Date of Last Report	
2. Principal Pla	ace of Business	2a. Mailing Address		10/20/1993 4. FEI Number	05/01/1996 Applied For	
21		26		59-3212073	Not Applicab	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
2		27		6. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
Zip	Country	28] Zip	Country	Trust Fund Contribution	Added to Fees	
√337		 	30	8. This corporation owes or has pain Personal Property Tax due June 1		
<u> </u>	9. Name and Address of Curr			10. Name and Address of New Reg		
MIER	RAU, CARRIE L.		81 Name			
	O ROOSEVELT BLVD.		82 Street Add	ddress (P.O. Box Number is Not Acceptable)		
CLE/	ARWATER FL 34621				`	
			83			
			84 City		FL 85 Zip Code	
44 Durawant to	o the provisions of Sections CO7.0	0602 and 607 1609. Elorida Statuta	the shows named con	rooration submits this statement for the n		
office or re	egistered agent, or both, in the Sta	ate of Florida. Such change was a	uthorized by the corpora	rporation submits this statement for the pration's board of directors. I hereby accep	t the appointment as registered	
	n tamiliar with land accept the ob-					
	The state of the s	sigations of, Section 607.0505, Fig.	nua Siaiules.			
SIGNATURE _	Signature, typed or printed name of registered		Registered Agent signature requ		DATE	
SIGNATURE E	Signature, typed or printed name of registered OFFICERS A	agest and litie if applicable (NOTE AND DIRECTORS			DATE ERS AND DIRECTORS IN 12	
SIGNATURE E	Signature, typed or printed name of registered OFFICERS A	agent and title if applicable (NOTE	Registered Agent signature requ	uired when reinstating)	DATE ERS AND DIRECTORS IN 12	
SIGNATURE E	Signature, typed or printed name of registered OFFICERS A DPST MIERAU, CARRIE L	agest and litie if applicable (NOTE AND DIRECTORS	13. 1.1 TITLE 1.2 NAME	uired when reinstating)	DATE ERS AND DIRECTORS IN 12	
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