FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

P93000079899 (9)

DOCUMENT #

MONDSTEIN, INC.

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Principal Place	of Business	Maling Address			
3937 HAMILTO SARASOTA F	ON CLUB CIRCLE	46 NORTH WASHIN SUITE 1 SARASOTA FL 342			
US		SAKASUTA PL 342	90	3. Date incorporated or Qualified 11/15/1993	 Date of Last Report 02/27/1995
2. Principal Pla	nce of Business	2a. Mailing Address		4. FEI Number	Applied For
		26		65-0450060	Not Applicable
Suite, Apt. #	¥, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		Oity & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
3] Zip	Country	Ζφ	Country	8. This corporation has liability for inta	ngible tax under s. 199.032,
s	25	29	30	Florida Statutes Yes	
	9. Name and Address of Cu	rrent Registered Agent		10. Name and Address of New Reg	stered Agent
			81 Name		
	ison, John Ith Washington BLVD.		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
SUITE 1			83		
	Ota Fl 34236		84 City		85 Zip Code
•				ration submits this statement for the purpo	FL T
SIGNATURE	Styratine, type if or pricted han ellot registered OFFICERS	agent and trie it applicable S AND DIRECTORS	(NC)*E Registered Agent signature requir	act when reinstalling) ADDITIONS/CHANGES TO OFFICE	
TILLE	DPT	☐ DELETE	1 1 TITLE		☐ Change ☐ Addition
NAMÉ	KIESSLING, HEINZ		1.2 NAME		
STREET ADDRESS	3937 HAMILTON CLUB C	CIRCLE	13 STREET ADDRESS		
DITY - S1 - ZIP	SARASOTA FL		1.4 CITY - ST - ZIP		Change Addition
109.E	VS KIESSLING, MONIKA G	DELETE	2 1 TITLE		
NAMf	3937 HAMILTON CLUB (CIRCLE	2 2 NAME 2 3 STREET ADDRESS		
STREET ADORESS : C-1Y-S1-ZP	SARASOT FL		2 4 CITY - ST - ZIP		
Inte The		[] DELETE	3 1 THTLE		☐ Change ☐ Addition
MAME			3.2 NAME		
STEEL LADDRESS			3.3 STREET ADDRESS		
CITY SE-ZIF		DELETE	3 4 CITY - ST - ZIP 4. 1 TiTLE		Change Addition
TITLE NAME		LJbean	4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CHY SI-ZIP			4.4 CITY - ST - ZIP		Change El Addition
TIFLE		DELETE	5 1 TITLE		Change Addition
NAM:			5.2 NAME		
STREET ADDRESS			5.3 STHEET ADDRESS 1 5.4 CHY-ST-ZIP		
CPY+S1-ZP Titut		DELETE	6 1711LE		Change Addition
NAME			6 2 NAME		
STREET LADORESS			6.3 STREET ADDRESS		
CHY-\$1-ZIF			6 4 CITY-ST-ZIP	for the exemption stated in Section 119.0	7/2VIA Florida Ctatutos Aurthor

14. Lon hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I furnished and does not qualify from the exemption indicates on this annual report or supplemental annual report is supplemental and accurate and that my signature shall have the same legal effect as if made under cartly 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.

SIGNATURE:

RINTED NAME OF SIGNING OFFICER OR DIRECTOR

349-1387

Daytine Phone #