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

CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

DIVISION OF CORPORATIONS P9400001608 (6)

**DOCUMENT #** 1. Corporation Name

MP FINANCIAL INVESTMENTS, INC.							
Principal Place of Business Mailing Address				1 18 0 11 0 0 1 11 1 10 11 11	Hare Beier Baith gable Edite Edial (1918)	OTEST ODIÐI I BIY EÐBI	
4705 N. 40TH ST. 4705 N. 40TH ST. HOLLYWOOD FL 33021 HOLLYWOOD FL 33021			021				
				<ol> <li>Date Incorporated or 12/29/1993</li> </ol>	Oualified <b>3a.</b> Date of Last F <b>05/01/1</b>		
	ace of Business	2a. Mailing Address		4. FEI Number		Applied For	
21		26		65-0491675		Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.			_ 1	5. Certificate of Status E	esired <b>\$8.7</b>	5 Additional	
22 3840 No 38 AUE 27 3840 No City & State City & State		6 38 AUG	G. Carmound of Carron E		Required		
23 Holly	wood	City & State	94	Election Campaign Fir     Trust Fund Contribution	on L Adde	00 May Be ed to Fees	
	/ Country	- 2φ F/ '	Country	8. This corporation has I	ability for intangible tax under s	199.032,	
24	25 33021	29 //	[30] <u>33021</u>		Yes No		
g. Name and Address of Current Registered Agent				10. Name and Address	of New Registered Agent		
DCMA	MINI DOMAIT		81 Name				
BENJAMIN BRANT				Address (P.O. Box Number is Not			
4705 N 40 ST SUITE 3910 HOLLYWOOD FL 33021				1840 NO	36 AUE		
HOLLI	WOOD PL 33021		84 City	11.11 1	<b>85</b> Z	ın Code	
11. Pursuant to	o the provisions of Sections 607 0502	and 607 1508 Florida Statute		Hollywood		530 21	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lani familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
TOTAL TITLE	ri, and accept the obligations of, Secti	ion 607.0505, Florida Statutes			11/		
SIGNATURE	Signature Typed of printed name of registered agent	Strat blee 1 Appointables (Main	FE Bugistered Agont signature i	entra de la composición del composición de la co	4/29/91	6	
12.	OFFICERS AND		13.		S TO OFFICERS AND DIRECTO	DRS INL 12	
TITLE	PSD	☐ DELETE	1 TITLE	1	Cnange		
NAME	Brant, Benjamin		. 12 NAME		J-		
STREET ADDRESS	4705 N. 40TH ST.		1.3 STREET ADDRESS	3940 NO 3	8 Ave		
CHTY-ST-ZIP	HOLLYWOOD FL 33021		14 CITY - St - ZIP	3840 NO 3	F1 33021		
TITLE	٧	☐ DELETE	2 1 7 TEF	7.0000	☐ Change	Addition	
NAME	BRANT, LAWRENCE		2.2 NAME		<b>-</b>		
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CITY-ST-ZIP	N. MIAMI FL		2 4 C(TY - ST - Z(F				
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NAME			6.2 NAME			]	
STREET ADDRESS			6 3 STREET ADDRESS			İ	
14 Ldo bereby	certify that the information supplied w	Silvator Commission	6 4 CITY - ST - ZIP				
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certify that the information indicated on this annual report or supplied and does not qualify for the exemption stated in Section 1.19.07(3)(k). Florida Statutes I further certify that the information indicated on this annual report or suppliemental 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/96 305 947 9055