## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 24 1997 8:00am

E INDRIBAT AND CRIPT BINDS NORTH WASTE NORTH COURT SEADS ENGLEDIER BLANKS STAND FOR COUR

Secretary of State

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P94000018413 (2)

MFR ENTERPRISES, INC.

STREET ADORESS

SIGNATURE:

CITY-ST-ZIP

Principal Pia 1739 TYLER HOLLYWOOD		Mailing Address 1739 TYLER STREET HOLLYWOOD FL 33020-								
						3. Date Incorporated or Qualified 03/09/1994		ate of Last 01/1996		
2. Principal	Place of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	40)		Applied For	-
21		26				65-0552166				,
Surto, Apt. #, etc.		Suite, Apt. #, etc.	<b>├</b> -¬ '			5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & Sta	ate	City & State				Election Campaign Financing     Trust Fund Contribution				
Zip <b>24</b>	Country Zip 25 29 3			intry		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No				
	9. Name and Address of Curre	ent Registered Agent		Ĺ <u>,</u>	110100111111111111111111111111111111111	10. Name and Address of New Reg	latered	Agent		_
	JSCH, MARTIN F III			81	Name			·		
	60 Brighton Lane IME FL 33331			82	Street Addr	ess (P.O. Box Number is Not Acceptable	e)			1
				83				<del></del>		1
				84	City		FL	<b>85</b> Zip	Code	-
office or	registered agent, or both, in the Sta ani familiar with, and accept the obli	te of Florida. Such change was igations of, Section 607,0505, f	authorize Florida Sta	d by tutes	the corporati	oration submits this statement for the pr ion's board of directors. I hereby accep	t the app	f changing pointment a	its registered is registered	
12.	Styrator - type-Europoil-orisin activitational agent and thaid applicable (NOTE: Re OFFICERS AND DIRECTORS				nt signature requir	ed when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE EDC AND	DIDECTO	NDC IN 10	٦
THILE	D	DELETE	13.	TLE		ADDITIONS/CHANGES TO OFFICE	ENS AN	Change		⊣ğ
NAME	DUCCH MADTINE			1.2 NAME						4
STREET ADDRESS		1.3 S	TREET	ADDRESS					CR2E034 (9/96)	
DITY-S1-7P	HOLLYWOOD FL 33020			ITY - S	T - ZIP					N N
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NAME				AME	·					
STREET ADDRESS					ADDRESS			į		
CITY-ST-7/P T:TLF	HOLLYWOOD FL 33020				T-ZIP			[ ] <sub>(***</sub>	4 3 3721	_
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NAME		₩\\	62 N					Onlings	, Audalon	
			0.614	MIL						1

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP 14. I do 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 his 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.