## 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

P94000037784 (3) DOCUMENT #

MADVET ASSOCIATE

1. Corporation Name

MARKET 2000	INC.											
Principal Place of Business Mailing Address					7777							
700 NW 57 PI SUITE 6 FT LAUDERDALE FL 33309		SUITE 6	700 NW 57 PI Suite 8 Ft Lauderdale FL 33309									
							3.	Date Incorporated or Qualified 05/16/1994		ate of Last Report 03/17/1995		
21				2a. Mailing Address 26			4,	4. FEI Number 65-0490244		Applied For Not Applica		
22	······································		Suite, Apt. #, etc. 27  City & State 28				5.	Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State		28					6.	Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zip 24	Country 25	Zip 29	3	Count	try			This corporation has liability for in Florida Statutes Yes	□] No			
9, Name	and Address of Cur	rent Registered A	gent		1	<b>.</b>	10.	Name and Address of New Ro	egistered	l Agent		
LANGE, CARLOS 700 NW 57 PI SUITE 6 FT LAUDERDALE FL 33309						Name Street Address (P.O. Box Number is Not Acceptable)						
I I LAUDENDALE PL 33308				8	4	City			<b></b>	85 Zip Code		

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 familiar with, and accept the obligations of Section 607.0505. Excited Statutes, the above-named corporation submits this statement for the purpose of changing its registered office familiar with, and accept the obligations of Section 607.0505. Excited Statutes.

Signature, typed or printed name of registered agent and title if applicable			(NOTE: Registered Agent signature required		DATÉ			
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	DELETE	1, 1 TITLE		☐ Change	Addition		
NAME	LANGE, CARLOS		: 1.2 NAME					
STREET ADDRESS	700 NW 57 PI SUITE 6		1.3 STREET ADDRESS					
CITY-ST-ZIP	FT LAUDERDALE FL 33309		1.4 CITY - ST - ZIP					
TITLE	\$D	□ DELETE	2. 1 TITLE		Change	☐ Addition		
NAME	LANGE, GINA		2.2 NAME					
STREET ADDRESS	700 NW 57 PI SUITE 6		2.3 STREET ADDRESS					
CITY-ST-ZIP	FT LAUDERDALE FL 33309		2.4 CITY - ST - ZIP					
TITLE		☐ DELETE	3. 1 TiTLE		☐ Change	[ ] Addition		
NAME			3.2 NAME	·		L.J Modition		
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TITLE		DELETE	4. 1 TITLE	/	☐ Change	[ ] Addition		
NAME			4.2 NAME		Onlinge	[] Addition		
STREET ADDRESS	•		4.3 STREET ADDRESS					
CITY - ST - ZIP			4.4 CITY-ST-ZIP					
AUTE		☐ DELETE	5.1 TITLE		☐ Change	[ ] Addition		
NAME			5.2 NAME		C outside	L_J ROOMON		
STREET ADDRESS			5.3 STREET ADDRESS					
CHTY-ST-ZIP			5.4 City-St-ZiP					
TITLE		DELETE	6. 1 TITLE		[] Change	[ Addition		
NAME			6.2 NAME		CT output	f"T wontion		
STREET ADDRESS			6.3 STREET ADDRESS					
CITY-ST-ZIP			6.4 CITY-ST-ZIP					

certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statules. 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 coveriged, or on an attackment with an address.

SIGNATURE:

NING OFFICER OR DIRECTOR

Applied For Not Applicable