

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
JENNIFER M. MURPHY
Treasurer of State
TALLAHASSEE, FLORIDA 32399-0001

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY -1 AM 11:23

DOCUMENT # **P94000068470 (1)**
1. Corporation Name:
MINERAL LIFE, INC.

Principal Office of Corporation: **6732 SW 71ST COURT
MIAMI FL 33143**
Mailing Address: **6732 SW 71ST COURT
MIAMI FL 33143**

DO NOT WRITE IN THIS SPACE

3. Date Reported (at least quarterly)	3a. Date of Last Report
09/15/1994	
4. FFI Number	Applied For / Not Applicable
65-0521782	
5. Certificate of Status Desired	\$8.75 Additional Fee Required
☐	
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
☐	
7. This corporation has liability for damages under § 199.032 Florida Statutes	☒ Yes ☐ No

2. Principal Office of Corporation	2a. Mailing Address
21. State: FL	26. State: FL
22. City & State	27. City & State
23. City: MIAMI	28. City: MIAMI
24. Zip: 33143	29. Zip: 33143
25. Country: USA	30. Country: USA

9. Name and Address of Current Registered Agent

**SYROP, JERRY M
8209 N. PINE ISLAND ROAD #301
TAMARAC FL 33321**

10. Name and Address of New Registered Agent

81. Name	
82. Street Address (P.O. Box Number or Mail Acceptation)	1515 UNIVERSITY DRIVE Suite 218
83. City	
84. City: CORAL SPRINGS	85. Zip Code: 33071

11. Pursuant to the provisions of Sections 601.01 and 601.02, Florida Statutes, this document is being submitted for the purpose of changing its registered office of principal office or office in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of a registered agent under Florida Statutes.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS

12a. Title	PRESIDENT
12b. Name	DAVID SHANKMAN
12c. Street Address	6732 SW 71st Ct
12d. City	MIAMI FL
12e. State	
12f. Zip	
12g. Country	
12h. Title	
12i. Name	
12j. Street Address	
12k. City	
12l. State	
12m. Zip	
12n. Country	
12o. Title	
12p. Name	
12q. Street Address	
12r. City	
12s. State	
12t. Zip	
12u. Country	

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

13a. Title	☐ Change ☐ Addition
13b. Name	
13c. Street Address	
13d. City	
13e. State	☐ Change ☐ Addition
13f. Zip	
13g. Country	
13h. Title	
13i. Name	
13j. Street Address	
13k. City	
13l. State	☐ Change ☐ Addition
13m. Zip	
13n. Country	
13o. Title	
13p. Name	
13q. Street Address	
13r. City	
13s. State	☐ Change ☐ Addition
13t. Zip	
13u. Country	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and is true and correct for the information stated on this form. I have been duly elected to the office of registered agent for this corporation and I have the same legal rights and obligations as any other registered agent under the laws of the State of Florida. I am familiar with and accept the obligations of a registered agent under Florida Statutes, and that my name appears on the list of registered agents in the State of Florida.

SIGNATURE: **David Shankman**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-95 (305) 661-9854

REMITTED BY MAY 2