SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P94000076747 (2)

M. PLACER, INC.

FILED Aug 20 1998 8:00am Secretary of State

Principal Place of Business Mailing Address						
1300 W. 84 STREET		P.O. BOX 5472				
HIALEAH FL 33014		MIAMI LAKES FL 33014 US		DO NOT WRITE IN THIS SPACE		
		US			3. Date Incorporated or Qualified	THO OF ACE
					10/19/1994	
2. Principal Place of Business		2a. Mailing Address		4. FÉI Number	Applied For	
21		26		65-0529664	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip Country		Zip	Country		8. This corporation owes or has paid the	
24	25 9. Name and Address of Curr	29 29 Anni	30]	·	Personal Property Tax due June 30. 10. Name and Address of New Registe	YesNo
BOLL	ZA, LLORELY	ont registered Agent	8	1 Name	To. Hame and Address of New Registe	red Agent
	W. 84 STREET		Ļ			
	EAH FL 33014		8	2 Street Addi	ress (P.O. Box Number is Not Acceptable)	
******	D#116 00017		8	3	<u> </u>	
			8-	6 Cit.		Test 7- 0-1
			0	f City	i	FL 85 Zip Code
office or i	to th e p rovisions of sections 607.05 regist ere d agent, or both, in the Statement amiliar with, and accept the obli	ite of Florida. Such change was	authorized b	v the corporati	oration submits this statement for the purpose of ion's board of directors. I hereby accept the appropriate the purpose of the	of ch ang ing its registered oppointment as registered
	Signature, typed or printed name of registered a			Agent signaluro req	uired when reinstaling) DAT	
12.		AND DIRECTORS	13.	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFICERS	S AND DIRECTORS IN 12
TITLE	POUZA LLODELV	L_] DELETE	1.1 TITLE			Change L Addition
NAME OXOCCI ADDDECC	BOUZA, LLORELY 1300 W. 84 STREET		1.2 NAME		•	8
STREET ADDRESS	HIALEAH FL 33014	1.3 STREET ADDRESS				1 2
CITY-ST-ZIP TITLE	P		2.1 TITLE	ST-ZIP		
NAME			2.7 NAME			Change Addition
STREET ADDRESS			2 3 STREET ADDRESS			
CITY-ST-ZIP			2.4 CITY-5	1		
TITLE		DELETE	3.1 TITLE			Change Addition
NAME			3.2 NAME	ļ		
STREET ADDRESS			3.3 STREE	TADDRESS		
CITY-ST-ZIP			3.4 C/TY-5	IT-ZIP		
TITLE		DELETE	4.1 TITLE			Change Addition
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREE	TADDRESS		
CITY-ST-ZIP			4.4 CiTY-ST-ZIP			
TITLE		L. J DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS				TADDRESS		
CITY-ST-ZIP			5.4 CITY-S	T-ZIP		
TITLE		DELETE				Change Addition
NAME etdeet annocce			6.2 NAME	* *****		
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP		AL ALL ELL A LIVE A	6.4 CITY-S	1-ZIP	2 440 07(0)() El 11 01 4 4 1 4 1	

I 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 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 changes 1900 an attachment with an address.

10 (3) 11/21 13

8/15/GD