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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P94000079274 (4)

1. Corporation MIRA G	ROUP, INC.	000732	· · · (-)	•				
Principal Place of Business Mailing Address							KO KOLLA KIBIT KASIK BIDI II	
7110 FAIRWAY DRIVE STE 18 MIAMI LAKES FL 33014		STE 18	7110 FAIRWAY DRIVE STE 18 MIAMI LAKES FL 33014		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
						10/28/1994		
-	ace of Business	<u> </u>	2a. Mailing Address			4, FEI Number	Applied F	
21		26				65-0529912	Not Apple	
Suite, Apt. 6		27	· • · · · · · · · · · · · · · · · · · ·		5. Certificate of Status Desired	\$8.75 Addition Fee Required		
City & State		City & S	State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Banded to Fees	
Zip 24	Country 25	Zip 29		Countr	У	This corporation owes or has paid the cur Personal Property Tax due June 30.	rent year Intangible] Yes No	В
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered	Agent	
STI Mu	IO FAIRWAY DRIVE E 18 AMI LAKES FL 33014	0502 and 607 1508	22 and 607 1500 Elevid Statute Ibr		City	Address (P.O. Box Number is Not Acceptable) FL corporation submits this statement for the purpose of	85 Zip Code	tered
office or re agent. I an SIGNATURE	agistered agent, or both, in the S in familiar with, and accept the o	State of Florida. Such obligations of, Section	change was a 607.0505, Fig	authorized b orida Statute	y the corp	corporation submits this statement for the purpose of poration's board of directors. I hereby accept the app	ointment as registe	ed
	Signatura, typied or printed name of registere		(NOT	E Registered Ac	ent signature	required when rainstating) DATE		
12.	OFFICERS	AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	P	l	DELETE	1.1 TITLE	İ		Change A	Addition
NAME	MIRABAL, PEDRO			1.2 NAME	- 1			
STREET ADDRESS	7110 FAIRWAY DRIVE, ST	TE 18		1.3 STREE	T ADDRESS			
CITY-ST-ZIP	MIAMI LAKES FL			1.4 CITY-	ST-ZIP		<u> </u>	
TITLE	VP	l	DELETE	21 TITLE	ļ		Change Ac	ddition
NAME	, , , , , , , , , , , , , , , , , , ,		2.5 NAME	!				
STREET ADDRESS	6105 NW 110 STREET				T ADDRESS			
CITY-ST-ZIP	MIAMI FL		DOLOTE	2. 4 CITY	ST-ZIP		T Chance T	dallia -
TITLE		1	DELETE	3.1 TITLE	ļ		Change A	Addition
RAME				3.2 NAME	I			
STREET ADDRESS					TADDRESS			
CITY-ST-ZIP			There	3.4. CITY	ST-ZIP			4.490 - 1
TITLE		i	DELETE	4.1 TITLE	I		Change Ad	ddition

14. Thereby certify that the information supplied with this filling does not qualify for the semption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental aprilual report is true and according 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 recorder or truefied empowered the 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 all inchment with an address

L 2 NAME

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

DELETE

DELETE

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

54 CITY-ST-ZIP

6.20 TREET ADDRESS

SIGNATURE:

STREET ADDRESS

STREET ADDRESS City-St-Zip

STREET ADORESS

CITY-ST-ZIP

TITLE

NAME

TITLE

4-20-90 55-1300

Change

Addition

FILED

May 04 1998 8:00am

Secretary of State