

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Tallahassee, Florida
Secretary of State
Jeffrey A. Byrd

APPROVED
AND
FILED

95 APR 27 PM 9:18

DOCUMENT # P94000081038 (9)

MIDAMERICA FINANCIAL CORPORATION

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4801 S. UNIVERSITY DRIVE
SUITE 200
FORT LAUDERDALE FL 33328

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SUITE 200
FORT LAUDERDALE FL 33328

3. Date of Report (Month/Day/Year)	3a. Date of Last Report
10/31/1994	N/A
4. FIC Number	Assigned For Not Applicable
65-0532210	
5. Certificate of Status (Lawyer)	XX \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	☐ \$5.00 May Be Added to Fees
8. Does corporation have responsibility for management fees under § 191.005, Florida Statutes	XX Yes ☐ No

2. Filing of report by corporation	2a. Mailing Address
21	26
22	27
23	28
24	25
29	30

9. Name and Address of Current Registered Agent

PEDRAJA, ALBERT
4801 S. UNIVERSITY DRIVE
SUITE 200
FORT LAUDERDALE FL 33328

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	FL
83. City	
84. City	

11. I, the undersigned, being duly sworn, depose and say that the above named corporation submits this statement for the purpose of changing its registered office and registered agent, as both in the State of Florida. Such change was authorized by the corporation's board of directors, thereby assent to the appointment as registered agent. I am a duly qualified agent to accept the obligations of, as provided in § 191.005, Florida Statutes.

Subscribed and sworn to before me this _____ day of _____, 1995.

Notary Public for the State of Florida

Notary Public for the State of Florida

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	D PEDRAJA, ALBERT 10921 LAKEVIEW S. DRIVE PEMBROKE LAKES FL 33026	1. NAME	300001470503 -05/02/95--01035--014 ****208.75 ****208.75
NAME		2. NAME	
NAME		3. NAME	
NAME		4. NAME	
NAME		5. NAME	
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NAME		27. NAME	
NAME		28. NAME	
NAME		29. NAME	
NAME		30. NAME	

4/27/95 *[Signature]*

SIGNATURE:

[Signature]

Albert Pedraja Director

04-21-95

(305) 434-9554

