

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000020118 (2)

1. Corporation Name

MBWC, INC.

Principal Place of Business

1450 N.E. 123RD ST.
NORTH MIAMI FL 33161

Mailing Address

1450 N.E. 123RD ST.
NORTH MIAMI FL 33161



3. Date Incorporated or Qualified

03/13/1995

3a. Date of Last Report

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SCHWARTZ, STANLEY J
1450 N.E. 123RD ST.
NORTH MIAMI FL 33161

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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 or registered agent, or both, 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, Section 607.0505, Florida Statutes.

SIGNATURE

Signature (typed or printed name of registered agent and then if applicable)

NOTE: Registered Agent signature is printed below

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME SCHWARTZ, STANLEY J
STREET ADDRESS 1450 N.E. 123RD ST.
CITY-ST-ZIP NORTH MIAMI FL 33161

1. TITLE ☐ Change ☐ Addition
2. NAME
3. STREET ADDRESS
4. CITY-ST-ZIP

TITLE D ☐ DELETE
NAME KATZ, HARDY C
STREET ADDRESS 1450 N.E. 123RD ST.
CITY-ST-ZIP NORTH MIAMI FL 33161

5. TITLE ☐ Change ☐ Addition
6. NAME
7. STREET ADDRESS
8. CITY-ST-ZIP

TITLE D ☐ DELETE
NAME MELTZER, JOEL S
STREET ADDRESS 2500 S. DIXIE HWY.
CITY-ST-ZIP MIAMI FL 33133

9. TITLE ☐ Change ☐ Addition
10. NAME
11. STREET ADDRESS
12. CITY-ST-ZIP

TITLE D ☐ DELETE
NAME GOODMAN, SHEILA
STREET ADDRESS 2500 S. DIXIE HWY.
CITY-ST-ZIP MIAMI FL 33133

13. TITLE ☐ Change ☐ Addition
14. NAME
15. STREET ADDRESS
16. CITY-ST-ZIP

TITLE D ☐ DELETE
NAME KEIGHLEY, MICHAEL J
STREET ADDRESS 16461 N.E. 28TH PLACE
CITY-ST-ZIP NORTH MIAMI BEACH FL 33180

17. TITLE ☐ Change ☐ Addition
18. NAME
19. STREET ADDRESS
20. CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

21. TITLE ☐ Change ☐ Addition
22. NAME
23. STREET ADDRESS
24. CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, unchanged, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN 29, 1996 305-893 8179

CR2E034 (12/95)