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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1	1996	DIVISION OF	CORPORATIONS		
DOCUN 1. Corporation	MENT # P950 (00020164 (6	3)		
	M ENTERPRISES, INC.			I NOCHINET HE NOVAN ANNI ANNI ANNI ANNI ANNI	ASIND NIANI DUNAN NICIP DINEN ANDL NASI
Principal Place of Business 11380 WEST SAMPLE ROAD CORAL SPRINGS FL 33065 Mailing Address 11380 WEST SAMPLE R CORAL SPRINGS FL 33065					
				3, Date Incorporated or Qualified 3a. 03/10/1995	Date of Last Report
2. Principal Plac	ce of Business	2a. Mailing Address		4. FEI Number	Applied For
<u>:: </u>		26		65 05 77 190	Not Applicable
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
3		28		Trust Fund Contribution	Added to Fees
Zip	Country 25	Z)p	Country 30	This corporation has liability for intangi Florida Statutes	
	9. Name and Address of Currer	t Registered Agent		10. Name and Address of New Registe	ered Agent
			81 Name		
BAKUM, WALTER 82 Street Ac			dress (P.O. Box Number is Not Acceptable)		
	WEST SAMPLE ROAD				
CUHAL	SPRINGS FL 33065		83		
			84 City		85 Zip Code
11 Purcuent to	the provisions of Sections 607 0600	and 607 1509. Elorida Statuto	s the above pamed earn	oration submits this statement for the purpose of	FL S E S S S S S S S S
or registere	d agent, or both, in the State of Florid	da. Such change was authorize	d by the corporation's bo	eard of directors. I hereby accept the appointment	nt as registered agent. I am
SIGNATURE .	i, and accept the obligations of, sect	ion 607.0003, Florida Gratutes.			
SIGNATURE	gnature, typed or printed name of registered agent		E. Registered Agent signature requi	ired when reinstating) DA	NTE
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	D DAVUM WALTED	☐ DELETE	1, 1 THILE		☐ Change ☐ Addition
NAME	BAKUM, WALTER	D 077 403	1.2 NAME	11380 W. SAMPLE	7 d
STREET ADORESS	10235 WEST SAMPLE ROA		1.3 STREET ADDRESS	11 380 6131111100	7.9
CITY-ST-ZIP	CORAL SPRINGS FL 33065		1.4 CHTY - ST - ZIP		Change Addition
TITLE NAME	BAKUM, STEVEN	DELETE	2 1 TITLE		Change Addition
STREET ADDRESS	10235 WEST SAMPLE ROA	D STE 107	2 2 NAME 2.3 STREET ADDRESS		
CITY-ST-ZIP	CORAL SPRINGS FL 33065		2.4 CITY-ST-ZIP		
THILE	COTAL CITITION I E 00000	☐ DELETE	3. 1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-7IP			3.4 CITY - ST - ZIP		
TITLE		☐ DELETE	4. 1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZIP			4.4 CITY-ST-ZIP		
TITLE		□ DELETE	5 1 TITLE		Change Addition
NAME			5 2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP		□ Nċi tic	5.4 CITY-ST-ZIP		Change C Addition
TITLE		□ D€LETE	6 1 TITLE		☐ Change ☐ Addition

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 cath; 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 state appears in Block 12 or Block 13 if changed, or on an attachment with an address.

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

SIGNATURE: WHELL (Solvey)

NAME

STREET ADDRESS

CR2E034 (12/95)