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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # DOCOMOR /2)

1. Corporation Name MENDIVIEW, INC. Principal Place of Business 1631 WEST 38TH PLACE UNIT 1503A HALEAH FL 33012 HALEAH FL 33012 UNIT 1503A HALEAH FL 33012						
					3. Date Incorporated or Qualified 04/14/1995	3a. Date of Last Report 11/06/1996
2. Princ pal 21	Place of Business	28. Mailing Addre	ss		4. FEI Number 65-0573442	Applied For Not Applicable
Suite Apt	; # etc.	Suite, Apt. #, 6	eto.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sto	916	City & State		· · · · · · · · · · · · · · · · · · ·	6. Election Campaign Financing	\$5.00 May Be
23	Country			ountry	Trust Fund Contribution	Added to Fees
Zip [24]	[25]	2.9	30	uistry	B. This corporation has liability for it Florida Statutes	ntangible tax under s. 199.032, Yes
.24]	9. Name and Address of Cur		130		10. Name and Address of New Reg	· ·
412	NDEZ, FAUSTO 20 WEST 18TH LANE LEAH FL 33012			 81 Name 82 Street Addr 83 84 City 	ess (P.O. Box Number is Not Acceptab	e) 85 Zip Code
office or agent 1 SIGNATURE	an tanillar with, and accept the ob- FAUSTO MG	ate of Florida, Such chang oligations of, Section 607.0 OCE 2	505, Florida St	and by the corporate that the corporate at the corporate	poration submits this statement for the prion's board of directors. I hereby acceptions the priority of the priority and the priority of the p	the appointment as registered 2 97 MATE
12.	T POS	AND DIRECTORS	13		ADDITIONS/CHANGES TO OFFIC	
101.6	MENDEZ, FAUSTO	☐ DEL	ſ	TITLE		Change
NAME	4400 WEST 40TH LANE		-	NAME		
STREET ADDRESS Offy-ST-ZIP	HIALEAH FL 33012			STREET ADDRESS City-St-zip		
1:TLF	ν	DEL		TITLE		☐ Change ☐ Addition
NAME	MENDEZ, ERIC		22	NAME		
STREET ADDRESS			23	STREET ADDRESS		j
CHY - ST - 760	HIALEAH FL 33012			CITY-ST-ZIP		
Titt		DEL		TITLE		Change Addition
NAME				NAME		
STREET ADORESS				STREET ADDRESS		
08Y 51-76P 101cF	The second secon	DEL		CITY-ST-ZIP TITLE		Change Addition
NAME		عاد کے		NAME		Las criorigo Lina recution
SINTE ADDRESS				STREET ADDRESS		
CHY-Sf-ZiF			1	CITY-ST-ZIP		Ì
TOLF		DEL		TITLE		Change Addition
H7Mi			5.2	NAME		Į
STREET AUCHESS			5.3	STREET ADDRESS		
CHY-ST 70P				CITY-ST-ZIP		
THLE		☐ DEL	ETE 61	TITLE		Change Addition

14. Ido 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 changed, or on an attachment with an address.

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

SIGNATURE:

NAMI

STREET ADDRESS

CHY-ST 200

0116952

FILED

Mar 17 1997 8:00am

Secretary of State