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 # 1. Corporation Name

P95000030485 (3)

MENDIVIEW, INC.

FILED Mar 20 1998 8:00am Secretary of State

|--|--|

Principal Place	e of Business	Mailing Address					
1631 WEST 8	98TH PLACE	1631 WEST 38TH PLA	CE				
UNIT 1503A HIALEAH FL 33012		UNIT 1503A HIALEAH FL 33012		DO NOT WRITE IN THIS SPACE			
MINLEAR PL	33012	MALCAN FL 33012			3. Date Incorporated or Qualified		
					04/14/1995		-
2. Principal P	lace of Business	2a. Mailing Address	_		4. FEI Number	1 7	Applied For
	EAST 29st STREET	26 1015 EAST	29th	STREET	65-0573442	-	lot Applicable
Suite, Apt.		Suite, Apt. #, etc.	<u> </u>	<u> </u>		\$8.75	Additional
22	_	27			5. Certificate of Status Desired	Fee F	Required .
City & State	8	City & State			6. Election Campaign Financing	\$5.00	May Be
23 HIAI	LENH, FL.	HIALEAH,			Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	Cour	•	8. This corporation owes or has paid the		
24 3301		29 33013	30 U	.s.A	Personal Property Tax due June 30.		No
	9. Name and Address of Curren	nt Registered Agent			10. Name and Address of New Registers	d Agent	
ME	N DEZ , FAUSTO		ŀ	81 Name			
412	20 WEST 18TH LANE		}	82 Street Addr	ress (P.O. Box Number is Not Acceptable)		
HI	ALEAH FL 33012		ļ				
				6 3			
			}	84 City		. 85 Zip	Code
			ŀ	J., O.,	F		
11. Pursuant (to the provisions of Sections 607.050	2 and 607.1508, Florida Stati	ites, the ab	ove-named corp	poration submits this statement for the purpose	of changing	its registered
orrice or re	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was ations of, Section 607.0505, F	autnonzec Iorida Statu	i by the corporat ites.	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	ppointment as	s registered
SIGNATURE	, ,						Ì
SIGNATURE	Signature, typed or printed name of registered age	ont and title if applicable (NC	TE: Registered	Agent signature requir	<u>-</u>		
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE	PDS	☐ DELETE	1.1 110	LE	•	☐ Change	☐ Addition
NAME	MENDEZ, FAUSTO		1.2 NA	ME			
STREET ADDRESS	4120 WEST 18TH LANE		1.3 STF	REET ADDRESS			ļi
CITY-ST-ZIP	HIALEAH FL 33012		1.4 CIT	Y-ST-ZIP			
TITLE	VT	☐ DELETE	2.1 TIT	LE		☐ Change	Addition (
NAME	MENDEZ, ERIC		2.2 NA	ME :			
STREET ADDRESS	4120 WEST 18TH LANE		2.3 STF	REET ADDRESS			
CITY-ST-ZIP	HIALEAH FL 33012		2. 4 CII	TY-ST-ZIP			
TITLE		DELETE	3.1 TITI	LE		Change	☐ Addition
NAME			3.2 NA	ME .			- [
STREET ADDRESS			3.3 STA	REET ADDRESS			
CITY-ST-ZIP			3.4. CI1	TY+ST-ZIP			
TITLE		DELETE	4.1 1(1)			☐ Change	Addition
NAME			4. 2 NA	ME		•	
STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP				Y-ST-ZIP			
TITLE		DELETE	5.1 1170			Change	☐ Addition
NAME			5.2 NA	···			
STREET ADDRESS				REET ADDRESS			İ
CITY-ST-ZIP TITLE		DELETE	6.1 TITE	Y-ST-ZIP		Change	Addition
Į.		_ orecte				51,01190	bread a restriction
NAME			6.2 NAM	1			1
STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP			64 CIT	Y-ST-ZIP			

14. I 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.

03/16/98