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 # P95000030919 (1)

MITCH-E ENTERPRISES, INC.

MILCH	E ENTERPRISES, INC.								
Principal Plac	e of Business	Mailing Address					#4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4) (0) 0) 460	IIA IBII IBAI
777 YAMATO	ROAD	777 YAMATO ROAD							
3112 3112						DO NOT WRITE	IN THIS SPAI	~E	
BOCA RATON FL 33431 BOCA RATON FL 33431			n			3. Date Incorporated or Qualified	IN THIS STA	, L	
						04/17/1995			
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		AI	pplied For
21		26				65-0578202		N	ot Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	□ \$		Additional
22 City & State		City & State				\			equired
23	•	28				6. Election Campaign Financing Trust Fund Contribution	\Box		May Be to Fees
Zip	Country	Zip	Countr	y		8. This corporation owes or has pa	_=		
24	25	29	30	•		Personal Property Tax due June	~~		No
	g. Name and Address of C	urrent Registered Agent		·. ——		10. Name and Address of New Re	gistered Age	11	
TEI	relman, mitchell	_	81	l] Nan	ne				
777	YAMATO ROAD SUT	TE 112	82	2 Stre	et Addre	ess (P.O. Box Number is Not Acceptate	ole)		
BO	CA RATON FL 33431			ļ					
			83	'					
			84	City			 85	i Zip	Code
44 Pureupot	to the provisions of Sections 60	17.0502 and 607.1509. Elorida Sta	tutes the abou	IO DOM	od corne	pration authorite this statement for the r	FL	naina i	to topictored
office or r	egistered agent, or both, in the	State of Florida, Such change wa	is authorized b	y the c	orporation	pration submits this statement for the pon's board of directors. I hereby accept	of the appointr	nent as	registered
	m tamiliar with, and accept the	obligations of, Section 607.0505,	Florida Statute	IS.					
SIGNATURE	Signature, typed or printed name of registri	ved agent and title if applicable (N	IOTE: Registered Ac	ent signa	ture require	d when reinstating)	DATE		<u>-</u>
12.		S AND DIRECTORS	13.		3	ADDITIONS/CHANGES TO OFFIC		ECTOF	RS IN 12
TITLE	P	☐ DELETE		1.1 TITLE				Change	Addition
NAME	epstein, Hilda		1.2 NAME		j				
STREET ADDRESS	4382 WHITE CEDAR ROA		1.3 STREE	TADDRES	is				
CITY-ST-ZIP	DELRAY BEACH FL 3344		1.4 CITY-	ST-ZIP					
TITLE	VP	*•		2.1 TITLE				Change	Addition
NAME			2.2 NAME	2.2 NAME					
STREET ADDRESS	16417 BERRY WAY		2.3 STREE	T ADDRES	SS				
CITY-ST-ZIP	DELRAY BEACH FL 3344		2.4 CITY-	ST-ZIP					
TITLE		DELETE	3.1 TITLE					Change	Addition
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREE		S				
CITY-ST-ZIP TITLE		DELETE	3.4. CITY- 4.1 TITLE	ST-ZIP			——————————————————————————————————————	Change	Addition
NAME		יין טנגנונ	4.1 HITLE 4.2 NAME		1		□'	n range	∟ Muulion
					.				
STREET ADDRESS			4.3 STREET		`				
CITY-ST-ZIP TITLE		DELETE	4.4 C(TY - : 5.1 TITLE	31-ZIP	+	···		Change	Addition
NAME		المام	5.2 NAME				□ '		
STREET ADDRESS			5.3 STREET	T ADDRES		•			
CITY-ST-ZIP			5.4 CITY-		<u> </u>				
TITLE		DELETE	6.1 TITLE	or ell	-			Change	Addition
NAME			6.2 NAME				·	•	
STREET ADDRESS			6.3 STREET	T ADDRES	s				

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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.

SIGNATURE HOOW TUNNS/METER BY TELL V-PA

1/12/98

FILED

Feb 03 1998 8:00am

Secretary of State