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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Murtham Secretary of State

DIVISION OF CORPORATIONS

1996

P95000064776 (4) DOCUMENT #
1. Corporation Name

THE MIATA GROUP, INC.



Principal Place of Business		Mailing Address			
11210 ST. ANDREWS COURT RIVERVIEW FL 33569		11210 ST. ANDREWS COURT RIVERVIEW FL 33569			
				3. Date Incorporated or Qualified 08/22/1995	3a. Date of Last Report
2. Principal Plac	ce of Business	2a. Mailing Address		4. FEI Number	Applied For
21 687 ALDERMAN RD		26		65-060639.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22	12/	27			Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23 YALM		Z(L)	Country	This corporation has liability for intal	
Zφ 24 <i>34/6</i> /	93 25 Country	29	30	Florida Statutes  Yes	
24 2700	9. Name and Address of Curre			10. Name and Address of New Reg	
11210 S RIVERME	n, steven J T. Andrews Court Ew Fl 33569		83 84 City	STIVIN J. KATZM dress (P.O. Box Number is Not Acceptable) DO 687 RIDERMAN F. PALM // DRBOR	FL 85 70 Code 34683
or registers	ad agent, or both, eathe State of Flor h, and accepting spligations of Sec System is refused using the contain OFFICERS AN	ida Such change was authorition 607,0505, Florida Statut marentin (applicate) ID DIRE CTORS	ized by the corporation's books.  2011 Registers April squature repr	ADDITIONS/CHANGES TO OFFIC	trinent as registered agent. I am  1.5/94  ERS AND DIRECTORS IN 12
TITLE	PVST	DELETE	1 1 TITLE	687 ANDERMAN REA SUIDE 127 PALM HARBOC, FL.	Change Addition
NAME	KATZMAN, STEVEN J	•	1.2 NAME	30105 127	04400
STREET ADDRESS	11210 ST. ANDREWS COUF	(f	1.3 STREET ADDRESS	PRIM HORBOC, FL.	34683
CITY - S1 - ZIP	RIVERVIEW FL 33569		1 4 CITY · ST · ZIP		Plenange Addition
TITLE	d Katzman, steven j	DELFTE	2 1 HILE	18	E-C-tange
NAME	11210 ST. ANDREWS COUP	т	2 2 NAME		
STREET ADDRESS	RIVERVIEW FL 33569	11	2.3 STREET ADDRESS 2.4 CITY - ST- ZIP		
CITY-ST-ZIP TITLE	107211121172 33433	DELETE	3 1 TeTLE		Change Addition
NAME			3.2 NAME		-
STREET ADDRESS			3.3 STHEET ADDRESS		
CITY - ST - ZIP			3.4 CITY - ST - ZIP		
THILE	A CONTRACTOR OF THE CONTRACTOR	☐ DELETE	4. 1 TIT <sub>-</sub> E		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4 3 STHEET ADDRESS	1 0 0 0 0 1 7 8 -04/22/960102	8271
CITY - ST - ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5 1 PILE	***200.00	☐ Change ☐ Addition
NAME			5 2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY - ST - ZIP			54 CITY - S7 - ZIP		
TITLE		DEFELE	6 1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		286
STREET ADDRESS			63 STREET ADDRESS		il ic or
CITY - ST - ZIP			6 4 CITY ST-ZIP		77 7-76

14. Ido 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 armual 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 13 it of an address.

SIGNATURE: