FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00								FILED					
COR	PROFIT ORPORATION INUAL REPORT		San	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State			Mar 06 1998 8:00am Secretary of State						
1998			DIVISION OF CORPORAT			ONS	_	Secre	tar	y o	1 21	lale	
DOCUN 1. Corporation	MENT # F	950000	087620	(7)									
MBC BA				` /									
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,													
Principal Place	of Business		Mailing Address										
811 OAK PARI		P.O. BOX 1423							•				
BRANDON FL 33511			SEFFNER FL 33584					DO NOT WRITE IN THIS SPACE					
								3. Date Incorporated or Qui	alified				
9 Principal Pt	ace of Business		2a. Mailing Addres	SS.				11/13/1995 4. FEI Number			I An	plied For	
	Air Way	Street	26 Same a	_			l	59-3365319				t Applicable	
Suite, Apt.	#, etc.		Suite, Apt. #, e	tc.			T.	5. Certificate of Status Desi	ed [_ \$	8.75 A Fee Re		
City & State			Crty & State		- 	•		6. Election Campaign Finan			\$5.00	 	
	na City, F		28	- 	Country			Trust Fund Contribution		the surrent	Added to		
Zip 32404		.S.A.	29	30				This corporation owes or Personal Property Tax du		_		No No	
	9. Name and Add	ress of Current F	legistered Agent			r	1	10. Name and Address of N	lew Regi	stered Age	nt		
	MAKIN, HELEN	_			81	Name Juc	lith	C. Young s (P.O. Box Number is Not Ad					
	OAK PARK PLACI NDON FL 33511				82			(P.O. Box Number is Not Ac Air Way Stree)			
J. V.	11001112 00077				83	1.231.		<u> </u>		t.	. .		
					84					FL	5 Zip (
11. Pursuant i	to the provisions of Sc	ections 607.0502 a	and 607.1508, Florida	Statutes, t	the above			L City ation submits this statement f	or the pur	naca of ob	anaina it	404 s registered	
office or re agent. I a	agistered agent, or bo m familiar with, and a	oth, in the State of egopt the obligate	Florida Such chang is of, Section 607.0	e was auth 505, Florida	orized by a Statutes	/ the corp s.	oration	's board of directors. I hereb	y accept t	the appoint	ment as	registered	
SIGNATURE	Ludit	$b \subset C$	ound					when reinstating)	3	3-2-9	8		
12.	Signature, Pled or printed to	OFFICERS AND	DIRECTORS	INOTE: Re	13.	ant signature	required w	ADDITIONS/CHANGES TO	OFFICE	RS AND DI	RECTOR	\$ IN 12	
TITLE	P\$I		X DEL	ETE	1.1 TITLE						Change	☐ Addition	
NAME	MCMAKIN, HELE				1.2 NAME	1000000							
STREET ADDRESS CITY-ST-ZIP	811 OAK PARK BRANDON FL 3	PLAUE 8511			1.3 STREET 1.4 CITY - S								
TITLE	V	2011	☐ DEt	ETE	2.1 TITLE		P/	S/T		X	Change	Addition	
NAME	YOUNG, JUDITH				2.2 NAME								
STREET ADDRESS	12908 AIR WAY				2.3 STREET								
CITY+ST-ZIP TITLE	PANAMA CITY F VP	L 33	DEU	ETE	2. 4 CITY - 1 3.1 TITLE	51-212					Change	Addition	
NAME	hughev.	Bonnie J	· .		3.2 NAME								
STREET ADDRESS	18495 S.	Dixie E	lighway,Bl	02	3 3 STREET	ADDRESS							
CITY-ST-ZIP	<u>Miami, F</u>	lorida 3	33157 □ DEL	C 1 C	3 4. CITY-	ST-ZiP					Change	Addition	
TITLE NAME			- L 061	. ונ	4.1 TITLE 4.2 NAME					Ų	CHANGE		
STREET ADDRESS				•	4.3 STREET								
CITY-ST-ZIP		·			4.4 CITY - S	1							
TITLE			☐ DEL	ETE	5.1 TITLE					L	Change	Addition	
NAME.					5.2 NAME	ADDRESS							
STREET ADDRESS CITY-S1-ZIP					5.4 CITY - 9								
TITLE			☐ DEL	ETE	6.1 TITLE		-				Change	Addition	

6.2 NAME

6.3 STREET ADDRESS

NAME

STREET ADDRESS

6.4 City-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 Flock 13 if changed or on an altachment with an address.

SIGNATURE:

(85.3)871–4616