

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

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**Feb 11 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000089599 (1)**
1. Corporation Name
MIAMI FLAGLER FOOTACTION, INC.



Principal Place of Business: **933 MAC ARTHUR BLVD. MAHWAH NJ 07430 US**
Mailing Address: **933 MAC ARTHUR BLVD. MAHWAH NJ 07430 US**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/22/1995	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 04-3298064	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent UNITED STATES CORPORATION COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301				10. Name and Address of New Registered Agent	
				81	Name
				82	Street Address (P.O. Box Number is Not Acceptable)
				83	
				84	City
					FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	<input checked="" type="checkbox"/> DELETE	1.1 TITLE	P/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROBINSON, J.M.		1.2 NAME	RALPH T. PARKS	
STREET ADDRESS	933 MACHARTHUR BLVD.		1.3 STREET ADDRESS	7880 BENT BRANCH DR. #100	
CITY-ST-ZIP	MAHWAH NJ		1.4 CITY-ST-ZIP	IRVING, TX 75063	
TITLE	V	<input checked="" type="checkbox"/> DELETE	2.1 TITLE	V/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ANDERSON, THEODORE L.		2.2 NAME	CHARLES M. ALBERT	
STREET ADDRESS	67 MILLBROOK STREET		2.3 STREET ADDRESS	7880 BENT BRANCH DR. #100	
CITY-ST-ZIP	WORCESTER MA 01608		2.4 CITY-ST-ZIP	IRVING, TX 75063	
TITLE	S	<input checked="" type="checkbox"/> DELETE	3.1 TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LUCEY, EDWARD J.		3.2 NAME	MARK W. MAYER	
STREET ADDRESS	67 MILLBROOK STREET		3.3 STREET ADDRESS	7880 BENT BRANCH DR. #100	
CITY-ST-ZIP	WORCESTER MA 01608		3.4 CITY-ST-ZIP	IRVING, TX 75063	
TITLE	AS	<input checked="" type="checkbox"/> DELETE	4.1 TITLE	AS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BAHLMAN, GERALD		4.2 NAME	NANCY L. WINTON	
STREET ADDRESS	933 MAC ARTHUR BLVD.		4.3 STREET ADDRESS	7880 BENT BRANCH DR. #100	
CITY-ST-ZIP	MAHWAH NJ		4.4 CITY-ST-ZIP	IRVING, TX 75063	
TITLE	T	<input checked="" type="checkbox"/> DELETE	5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROACH, DONALD V		5.2 NAME		
STREET ADDRESS	933 MACARTHUR BLVD.		5.3 STREET ADDRESS		
CITY-ST-ZIP	MAHWAH NJ		5.4 CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			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 Block 13 if changed, or on an attachment with an address.

SIGNATURE:  **NANCY L. WINTON** 2-3-98 978-501-5900

CR2E034 (10/97)