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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT #

P95000090493 (4)

Corporation Name

MASON AND COMPANY, INC.

rinal Place of Business Mailing Address

Principal Place of Business 1863 N.W. 88TH TERRACE MIAMI FL 33147		Mailing Address	Mailing Address		
		1863 N.W. 88TH TERRACE Miami Fl 33147			
				3. Date incorporated or Qua 11/28/1995	alified 3a. Date of Last Report
2. Principal Plac	ce of Business	2a. Mailing Address		4. FE: Number	Applied For
21		26			Not Applicable
Suite. Apt #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desi	ed \$8.75 Additional
		27			Fee Required
City & State		Oty & State		6. Election Campaign Finan Trust Fund Contribution	cing \$5.00 May Be Added to Fees
23		28	Country		lity for intangible tax under s. 199.032,
Zip	Country	7 p	Country 30		Yes No
24	9. Name and Address of Current		30	10. Name and Address of	
	3.		81 N	3000 / T	nason
4 MASON	i, juanita		82 8	riget Address (P.O. Box Number is Not Ad	
	.W. 88TH TERRACE		62 2	18/30/42.8	8 an
	FL 33147		В3		
,			<u></u>		85 Zip Code
			84 C	Midne	FL S 220 FU?
11. Pursuant to	the provisions of Sections 607.0502 a	and 607.1508, Florida Statu	tes, the above nam	ned corporation submits this statement for	the purpose of changing its registered office
or ropintoro	id agent, or both, in the State of Florida i, and accept the obligations of, Section	i. Such change was authon	zed by the corporat	tion's board of directors. Thereby accept t	ne appointment as registered agent. I am
()	1.10 1 1	0 1 1 1 1	·		2/27/96
SIGNATURE	addmina	asol	TITE Bog stared Agin : sign	natine required when nentstating?	DAYE
12. //	OFFICERS AND		13.	ADDITIONS/CHANGES	O OFFICERS AND DIRECTORS IN 12
TITLE /	Р	DELETE	1 * TUPLE		Change Addition
NAME	MASON, JUANITA		1.2 NAME		
STREET ADDRESS	1863 N.W. 88TH TERRACE		1.3 STREET ADD	SS 180	
CITY - ST- ZIP	MIAMI FL 33147		1.4 CITY - \$7 - ZI	β	Change Addition
THEF	V AAAAAN BANKO A	DELETE	2 171116		Change Addition
NAME	MASON, DAVID G		2.2 NAME		
STREET ADDRESS	1863 N.W. 88TH TERRACE		23 STREET ADD		
CITY - ST - ZIP	MIAMI FL 33147		240117-51-7	IP	Change Addition
TITLE	ST ALICTIAL DEATED	DELETE	3 1 TOLE		
NAME	AUSTIN, DEATRA 1863 N.W. 88TH TERRACE		3.2 NAME		
STREET ADDRESS	MIAMI FL 33147		33 SIFEET AD	ľ	
CHY-ST-ZIP	MIRMITE 33147	☐ DELETE	3.4 CHTY - ST - 7 4. 1 THTLE		Change Addition
TITLE			4.1 THE	<u> 50,000</u> 1	1735535 01058003
NAME			4.3 STREET ADD	~03/07/96-	-010580 0 3
STREET ADDRESS			4.3.81HEET,AU.	***200.00	
C-TY - ST - ZIF		DELETE	5 1 Till.E ,		Change Addition
TILE		Office	5.2 NAME		<u> </u>
NAME STOCET ADDRESS			5.3 SPHEET AU	OBESS	
STREET ADDRESS			54 CITY - ST 7		
CITY-ST-ZIF TITLE		DELETE	6 1 THLE	<u> </u>	Change Addition
NAME		<u>_</u>	6.2 NAME	1	
			63 STREET AD	DRESS	
STREET ADDRESS			64 CITY - S7 - 2	[
CITY - ST - ZIP			34011 3 -2	The state of the s	4:0 02/0/IA Floride Statutes I further

14. I do 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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:

MIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

50-3-7-96