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Apr 02 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P96000008351 1. Corporation Name MEGO CORPORATION			
Principal Place of Business 10825 SW 118 CT MIAMI, Florida 33186 DADE COUNTY		Mailing Address	
2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	3a. Date of Last Report
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	2/24/96	-
22. City & State	27. City & State	4. FEI Number	Applied For
23. Zip	28. Zip	65-0637476	Not Applicable
24. Country	29. Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
		☒ Yes ☐ No	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
MARIA VICTORIA MEJIA 10825 SW 118 CT MIAMI, Florida 33186		81. Name 82. Street Address (P.O. Box Number is Not Acceptable) 83. 84. City 85. Zip Code	
		FL	
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, and I am authorized to accept the obligations of Section 607.0505, Florida Statutes.			
SIGNATURE			
(NOTE: Registered Agent signature required when reinstating)			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE PRESIDENT 1.2 NAME MARIA VICTORIA MEJIA 1.3 STREET ADDRESS 10825 SW 118 CT 1.4 CITY-ST-ZIP MIAMI, Florida 33186		1.1 TITLE VICE PRESIDENT 1.2 NAME JOSE GUERRERO 1.3 STREET ADDRESS 10825 SW 118 CT 1.4 CITY-ST-ZIP MIAMI, Florida 33186	
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		2.1 TITLE T 2.2 NAME MAURICIO GOMEZ 2.3 STREET ADDRESS 10825 SW 118 CT 2.4 CITY-ST-ZIP MIAMI, Florida 33186	
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
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CR2E034 (9/96)

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/24/97 (305) 595-4159
Date Daytime Phone #