

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

FILED
Jan 22 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000015675 (7)**

1. Corporation Name

MAB BOOKSELLERS, INC.

Principal Place of Business

**1928 HOLLYWOOD BLVD
HOLLYWOOD FL 33020
US**

Mailing Address

**8079 S.W. 86TH TERRACE
MIAMI FL 33143**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/20/1996	
21 3195 Ponce de Leon Blvd.	26	4. FEI Number 65-0646357		Applied For <input type="checkbox"/> Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State 23 Coral Gables		City & State 28		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Zip 24 33134	Country 25 USA	Zip 29	Country 30		

9. Name and Address of Current Registered Agent

**BROWN, MICHAEL S
8079 S.W. 86TH TERRACE
MIAMI FL 33143**

10. Name and Address of New Registered Agent

81 Name Alan Brown
82 Street Address (P.O. Box Number is Not Acceptable) 7822 SW 102 Lane
83
84 City Miami FL 85 Zip Code 33156

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

Alan Brown Alan Brown Director

1/6/98

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BROWN, MICHAEL S	1.2 NAME	
STREET ADDRESS	8079 S.W. 86TH TERRACE	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33143	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BROWN, JANET K	2.2 NAME	
STREET ADDRESS	8079 S.W. 86TH TERRACE	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33143	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BROWN, ALAN F	3.2 NAME	
STREET ADDRESS	8079 S.W. 86TH TERRACE	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33143	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BROWN, MEREDITH ANNE	4.2 NAME	
STREET ADDRESS	8079 S.W. 86TH TERRACE	4.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33143	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		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:

Alan Brown Director Alan Brown 1/6/98 (305) 529-1400 x142)

CR2E034 (10/97)