

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Oct 16 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 # P96000025400 (8)
1. Corporation Name
MUNRO & MUNRO ENTERPRISES, INC.

Principal Place of Business 7205 NW 19 Street Suite 301 Miami, FL 33126	Mailing Address 7205 NW 19th Street Suite 301 Miami, FL 33126
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 7205 NW 19th Street Suite, Apt. #, etc. 22 Suite 301 City & State 23 Miami, FL Zip 24 33126	25 Country USA	26. Mailing Address 26 7205 NW 19th Street Suite, Apt. #, etc. 27 Suite 301 City & State 28 Miami, FL Zip 29 33126	30 Country USA
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3. Date Incorporated or Qualified 3/18/1996	4. FEI Number 65-0659395	Applied For Not Applicable
5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No		

9. Name and Address of Current Registered Agent

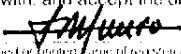
10. Name and Address of New Registered Agent

Deborah R. Waks
Dadeland Towers North
9200 S. Dadeland Blvd.
Suite 700
Miami, FL 33156

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	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. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE


Signature types for limited form of registered agent as stated applicable

(NOTE: Registered Agent signature required when reinstating)

10-15-98

DATE

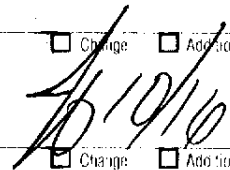
12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	President	☐ DELETE
NAME	Lorin Munro	
STREET ADDRESS	7205 NW 19th ST, Ste 301	
CITY, ST, ZIP	Miami, FL 33126	
TITLE	Vice President	☐ DELETE
NAME	Olivia Munro	
STREET ADDRESS	7205 NW 19th ST, Ste 301	
CITY, ST, ZIP	Miami, FL 33126	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY, ST, ZIP	
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY, ST, ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY, ST, ZIP	

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***165.00



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 is derived from 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:



LORIN MUNRO

10-15-98

(305)471-5998

CR2E034 (5/98)