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CORPORATION ANNUAL REPORT 1998



FLORIDA DEFARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Jan 30 1998 8:00am Secretary of State

	MENT # P96 MAC, INC.		26204 (3			ļ				
Principal Place of Business Mailing Address					·	·		1166 <b>40</b> 767 <b>63</b> 17 <b>7</b>	LIBIU WIII # 1/8/1	BRILL ALBI (BRI
40626 E. SECOND AVE. 40626 E. SECOND AVE. UMATILLA FL 32784 UMATILLA FL 32784										
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						Į	3. Date Incorporated or Quali	fied		
2 Principal P	Place of Business		a. Mailing Address				03/19/1996 4. FEI Number			l Ameliant Fac
		OURT 25	¬∵ •	RTY	Court		59-3367470		-	Applied For Not Applicable
Suite, Apt.			Suite, Apt. #, etc.	<u>-, , ,                                </u>	<del></del>			d E	\$8.7	5 Additional
22		27	7				5. Certificate of Status Desire	ط م ———		Required
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Zip	Country		Zip		untry	<del>-</del>	8. This corporation owes or h			
24 3344	Z 25 U.S.	$A$ . $\frac{1}{29}$	3344z	30 4	4.5.A.		Personal Property Tax due	June 30.	Yes	□ No
	g, Name and Address o	of Current Reg	istered Agent				10. Name and Address of No.	<b>Register</b>	ed Agent	
	INERNEY, CAROL J				81 Name	Car	ROL J. MalNE	CR.W.FEY		
	526 E. SECOND AVE.				82 Street	Addres	ss (P.O. Box Number is Not Acc	eptable)		
UM	IATILLA FL 32784				83	02	LIBERTY COL	1 R.T		
					63					
					84 City	<u> </u>	D		85 2	ip Code 3442
44 Pursuant	to the previsions of Costions	607 0502 and	607 1509 Florido Ch	tutos the c			EFIELD BEACH		د ده ال	3442
II. Full Sualik	registered agent of both in I									
office or r	registered agent, or both, in t	the State of Flo	orida. Such change wa	s authorize	above-named ed by the corp	corpor	n's board of directors. I hereby	accept the a	ppointment	as registered
office or r agent. I a	am familiar with, and accept t	the State of Flo the obligations	orida. Such change was of, Section 607.0505,	s authorize Florida Sta	above-named ed by the corp atutes.	corpor	ation submits this statement for n's board of directors. I hereby	accept the a	ippointment	as registered
office or r agent. I a SIGNATURE										as registered
	Signature, typed or printed name of re-		lite if applicable. (N		ed Agent signature		when reinstating)	ДАТ		· · · · ·
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SIGNATURE:

1-21-98 (800)822-1408