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Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000034299

1. Corporation Name
MICHELL M.F.G. CORP.



Principal Place of Business
13263 S.W. 124TH ST.
MIAMI FL 33186

Mailing Address
13263 S.W. 124TH ST.
MIAMI FL 33186

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/18/1996

2. Principal Place of Business

21 136-44 SW 142 AV

2a. Mailing Address

26 136-44 SW 142 AV

4. FEI Number

65-0668659

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

22 City & State

23 Miami FL

27 City & State

28 Miami FL

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

24 33186 25 USA

29 33186 30 USA

8. This corporation owes the current year Intangible Personal Property Tax.

Yes No

9. Name and Address of Current Registered Agent

MARIA F ALVAREZ
14733 S.W. 43RD TERRACE
MIAMI FL 33185

10. Name and Address of New Registered Agent

81 Name JAIR GARCIA

82 Street Address (P.O. Box Number is Not Acceptable)

147-33 SW 43 TR.

83

84 City Miami

FL

85 Zip Code 33185

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

(NOTE: Registered Agent signature required when reinstating)

1 17 99

DATE

12. OFFICERS AND DIRECTORS

TITLE PT
NAME MARIA F ALVAREZ
STREET ADDRESS 14733 SW 43 TER.
CITY-ST-ZIP MIAMI FL 33185

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE JAIR GARCIA
1.2 NAME
1.3 STREET ADDRESS 136-44 SW 142 AV # H
1.4 CITY-ST-ZIP Miami FL 33186

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 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

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Signature

Date

Daytime Phone #

1 17 99 305 278 9876

CR2E034 (11/98)