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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

May 11 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000065345 (6)

MNNF ACQUISITION CORP.

Principal Place of Business Mailing Address							
S365 ASCOT BEND BOCA RATON FL 33496 BOCA RATON FL 33496 BOCA RATON FL 33496			96				
0001111110	11 12 40100		••		DO NOT WRITE I	N THIS SPACE	
					3. Date Incorporated or Qualified 08/05/1996		
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	Ar	oplied For
21	# Mother Nature NF	26			65-0711248	No	ot Applicable
Suite, Apt.	"1303 SE 17th St.	Suite, Apt #, etc.			5. Certificate of Status Desired		Additional equired
City & Stat	Ft Laud., Ft. 33316	City & State			6. Election Campaign Financing		May Be
23	954-463-0657	26			, , ,		to Fees
Zip	Country	Zip	1		8. This corporation owes or has paid		
24	25	29	30		Personal Property Tax due June 3] No
<u> </u>	9. Name and Address of Curre	int Registered Agent		M N	10. Name and Address of New Regi	istered Agent	
	ISEKOFF, JOYCE 85 ASCOT BEND		l'	31 Name			
	OCA RATON FL 33496		Ī	32 Street A	Address (P.O. Box Number is Not Acceptable	e)	
"	OCK NATON FE 33430		<u> </u>	33			
1			Ĺ			·	
			1	City		FL 85 Zip	Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Sta	itutes, the ab	ove-named	corporation submits this statement for the pulporation's board of directors. I hereby accept	rpose of changing it	ts registered
agent i a	registered agent, or both, in the Stat am familiar with, and accept the obli	e of Flooda. Such chan ge w a gations of, Section 607,0505,	is authorized Florida Statu	by the corp tes.	poration's board of directors. I hereby accept	the appointment as	registered
SIGNATURE							
	Signature typed or purified nature of registered a			Agent signature	required whon reinstating)	DATE	
12.	OFFICERS AT						
TITLE	1		13.	,	ADDITIONS/CHANGES TO OFFICE		
TITLE	PASEKOFF, JOYCE	DELETE	1.1 TiTL		ADDITIONS/CHANGES TO OFFICE	Change	AS IN 12
NAME	PASEKOFF, JOYCE 5365 ASCOT BEND		1.1 TrTL 1.2 NAM	1E	ADDITIONS/CHANGES TO OFFICE		
NAME STREET ADDRESS			1.1 TITL 1.2 NAM 1.3 STR	ME EET ADDRESS	ADDITIONS/CHANGES TO OFFICE		
NAME	5365 ASCOT BEND		1.1 TITL 1.2 NAM 1.3 STR	ME LET ADDRESS (-ST-ZIP	ADDITIONS/CHANGES TO OFFICE		
NAME STREET ADDRESS CITY-ST-ZIP	5365 ASCOT BEND	☐ DELETE	1.1 THL 1.2 NAM 1.3 STR 1.4 CH	ME EET ADDRESS 7-SE-ZIP E	ADDITIONS/CHANGES TO OFFICE	Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE	5365 ASCOT BEND	☐ DELETE	1.1 T/TL 1.2 NAM 1.3 STR 1.4 C/T/ 2.1 T/TL 2.2 NAM	ME EET ADDRESS 7-SE-ZIP E	ADDITIONS/CHANGES TO OFFICE	Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	5365 ASCOT BEND	☐ DELETE	1.1 T/TL 1.2 NAM 1.3 STR 1.4 C/T' 2.1 T/TL 2.2 NAM 2.3 STR	ME Eftaddress /-st-zip E	ADDITIONS/CHANGES TO OFFICE	☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	5365 ASCOT BEND	☐ DELETE	1.1 TITL 1.2 NAM 1.3 STR 1.4 CIT 2.1 TITL 2.2 NAM 2.3 STR 2.4 CIT 3.1 TITL	ME LET AUDRESS (-ST-ZIP E ME LET AUDRESS Y-ST-ZIP E	ADDITIONS/CHANGES TO OFFICE	Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	5365 ASCOT BEND	☐ DELETE	1.1 TITL 1.2 NAM 1.3 STR 1.4 CIT 2.1 THL 2.2 NAM 2.3 STR 2.4 CIT 3.1 TITL 3.2 NAM	AE EFT ADDRESS (-ST-ZIP E BE EFT ADDRESS Y-ST-ZIP E AE	ADDITIONS/CHANGES TO OFFICE	☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	5365 ASCOT BEND	☐ DELETE	1.1 TITL 1.2 NAM 1.3 STR 1.4 CIT 2.1 TITL 2.2 NAM 2.3 STR 2.4 CIT 3.1 TITL 3.2 NAM 3.3 STR	AE LET ADDRESS -ST-ZIP E BEET ADDRESS Y-ST-ZIP E AE EEI ADDRESS	ADDITIONS/CHANGES TO OFFICE	☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	5365 ASCOT BEND	DELETE	1.1 TITL 1.2 NAM 1.3 STR 1.4 CIT 2.1 TITL 2.2 NAM 2.3 STR 2.4 CIT 3.1 TITL 3.2 NAM 3.3 STR 3.4 CIT	AE LET ADDRESS -ST-ZIP E BEET ADDRESS Y-ST-ZIP E AE EEI ADDRESS Y-ST-ZIP E AE EEI ADDRESS	ADDITIONS/CHANGES TO OFFICE	Change Change Change	Addition Addition Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	5365 ASCOT BEND	☐ DELETE	1.1 TITL 1.2 NAM 1.3 STR 1.4 CIT 2.1 TITL 2.2 NAM 2.3 STR 2.4 CIT 3.1 TITL 3.2 NAM 3.3 STR 3.4 CIT 4.1 TITL 4.1	AE FET ADDRESS (-ST-ZIP BE EEFT ADDRESS Y-ST-ZIP E AE EEFT ADDRESS Y-ST-ZIP E EEFT ADDRESS Y-ST-ZIP E	ADDITIONS/CHANGES TO OFFICE	☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME	5365 ASCOT BEND	DELETE	1.1 TITL 1.2 NAM 1.3 STR 1.4 CIT 2.1 TITL 2.2 NAM 2.3 STR 2.4 CIT 3.1 TITL 3.2 NAM 3.3 STR 3.4 CIT 4.1 TITL 4.2 NAM	AE LET ADDRESS (-ST-ZIP E EEFT ADDRESS Y-ST-ZIP E AE EEFT ADDRESS Y-ST-ZIP E ME EMME	ADDITIONS/CHANGES TO OFFICE	Change Change Change	Addition Addition Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	5365 ASCOT BEND	DELETE	1.1 ITIL 1.2 NAM 1.3 STR 1.4 CIT 2.1 THL 2.2 NAM 2.3 STR 2.4 CIT 3.1 THL 3.2 NAM 3.3 STR 3.4 CIT 4.1 THL 4.2 NAM 4.3 STR	AE LET ADDRESS	ADDITIONS/CHANGES TO OFFICE	Change Change Change	Addition Addition Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME	5365 ASCOT BEND	DELETE	1.1 ITIL 1.2 NAM 1.3 STR 1.4 CIT 2.1 THL 2.2 NAM 2.3 STR 2.4 CIT 3.1 THL 3.2 NAM 3.3 STR 3.4 CIT 4.1 THL 4.2 NAM 4.3 STR	AE LET ADDRESS (-ST-ZIP LEET ADDRESS Y-ST-ZIP E AE LEET ADDRESS Y-ST-ZIP E ME LEET ADDRESS (-ST-ZIP E ME LEET ADDRESS (-ST-ZIP LEET ADDRESS (-ST-ZIP LEET ADDRESS (-ST-ZIP	ADDITIONS/CHANGES TO OFFICE	Change Change Change	Addition Addition Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	5365 ASCOT BEND	DELETE DELETE	1.1 TITL 1.2 NAM 1.3 STR 1.4 CIT 2.1 TITL 2.2 NAM 2.3 STR 2.4 CIT 3.1 TITL 3.2 NAM 3.3 STR 3.4 CIT 4.1 TITL 4.2 NA 4.3 STR 4.4 CIT	AE LET ADDRESS	ADDITIONS/CHANGES TO OFFICE	Change Change Change	Addition Addition Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE	5365 ASCOT BEND	DELETE DELETE	1.1 ITIL 1.2 NAM 1.3 STR 1.4 CIT 2.1 THL 2.2 NAM 2.3 STR 2.4 CIT 3.1 THL 3.2 NAM 3.3 STR 3.4 CIT 4.1 THL 4.2 NA 4.3 STR 4.4 CIT 5.1 THL	AE LET ADDRESS	ADDITIONS/CHANGES TO OFFICE	Change Change Change	Addition Addition Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	5365 ASCOT BEND	DELETE DELETE DELETE	1.1 TITL 1.2 NAM 1.3 STR 1.4 CIT 2.1 TITL 2.2 NAM 2.3 STR 2.4 CIT 3.1 TITL 3.2 NAM 3.3 STR 4.1 TITL 4.2 NA 4.3 STR 4.4 CIT 5.1 TITL 5.2 NAM 5.3 STR	AE LET ADDRESS (-ST-ZIP LEET ADDRESS Y-ST-ZIP E AC LEET ADDRESS Y-ST-ZIP E ME LEET ADDRESS Y-ST-ZIP E ME LEET ADDRESS Y-ST-ZIP E ME LEET ADDRESS (-ST-ZIP E ME	ADDITIONS/CHANGES TO OFFICE	Change Change Change	Addition Addition Addition Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	5365 ASCOT BEND	DELETE DELETE	1.1 TITL 1.2 NAM 1.3 STR 1.4 CIT 2.1 TITL 2.2 NAM 2.3 STR 2.4 CIT 3.1 TITL 3.2 NAM 3.3 STR 4.1 TITL 4.2 NA 4.3 STR 4.4 CIT 5.1 TITL 5.2 NAM 5.3 STR	AE LET ADDRESS (-ST-ZIP E AE EET ADDRESS Y-ST-ZIP E AE AE EET ADDRESS Y-ST-ZIP E ME EET ADDRESS (-ST-ZIP E AE EET ADDRESS (-ST-ZIP E AE EET ADDRESS (-ST-ZIP E AE EET ADDRESS (-ST-ZIP	ADDITIONS/CHANGES TO OFFICE	Change Change Change	Addition Addition Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	5365 ASCOT BEND	DELETE DELETE DELETE	1.1 ITIL 1.2 NAM 1.3 STR 1.4 CIT 2.1 THL 2.2 NAM 2.3 STR 2.4 CIT 3.1 THL 3.2 NAM 3.3 STR 3.4 CIT 4.1 THL 4.2 NA 4.3 STR 4.4 CIT 5.1 THL 5.2 NAM 5.3 STR 5.4 CIT 6.1 THL 6.2 NAM	AE LET ADDRESS (-ST-ZIP E AE EEF ADDRESS Y-ST-ZIP E AE LEEI ADDRESS Y-ST-ZIP E ME LEET ADDRESS (-ST-ZIP E AE LEET ADDRESS (-ST-ZIP E AE LEET ADDRESS (-ST-ZIP E AE LEET ADDRESS (-ST-ZIP E LEET ADDRESS (-ST-ZIP E LEET ADDRESS (-ST-ZIP E	ADDITIONS/CHANGES TO OFFICE	Change Change Change	Addition Addition Addition Addition

14. Thereby 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 supplied enter a required and accurate and that my signature shall have the same logal 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 thanged, or on an attachment with an address.