

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

FILED

May 22 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000069520 (0)

1. Corporation Name

MENAGE INCORPORATED

Principal Place of Business

281 N.E. 16TH PLACE  
SUITE 404  
FORT LAUDERDALE FL 33305

Mailing Address

281 N.E. 16TH PLACE  
SUITE 404  
FORT LAUDERDALE FL 33305-2803

3. Date Incorporated or Qualified  
08/19/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 528 N.E. 10th Avenue.  
Suite, Apt. #, etc.

26 528 N.E. 10th Avenue.  
Suite, Apt. #, etc.

22 City & State

27 City & State

23 Ft. Lauderdale, FL  
Zip Country

28 Ft. Lauderdale, FL  
Zip Country

24 33301

25 U.S.A.

29 33301

30 U.S.A.

4. FEI Number

Applied For

65-0730390

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 has liability for intangible tax under s. 199.032,  
Florida Statutes

☒

Yes

☐

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BATALLA, JOSE M  
281 N.E. 16TH PLACE  
SUITE 404  
FORT LAUDERDALE FL 33305

81 Name

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

83

84 City

FL

85 Zip Code

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 reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
P  
BATALLA, JOSE M  
281 N.E. 16TH PLACE, STE 404  
FORT LAUDERDALE FL 33305

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
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CITY - ST - ZIP  
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0261801

CR25034 (9/96)