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FILED
Jun 24 1998 8:00am
Secretary of State

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

PROFIT CORPORATION ANNUAL REPORT **1998**

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

DOCUMENT # P96000071662 (6)

1. Corporation Name
MIMO, INC.

[redacted]

Principal Place of Business
12555 BISCAYNE BLVD
SUITE 924
MIAMI BEACH FL 33181

Mailing Address
12555 BISCAYNE BLVD
SUITE 924
MIAMI BEACH FL 33181

DO NOT WRITE IN THIS SPACE

8. Date Incorporated or Qualified
08/26/1996

4. FEI Number
65-0770410 — 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

3. Principal Place of Business — Suite, Apt. #, etc. — City & State — Zip — County

2a. Mailing Address — Suite, Apt. #, etc. — City & State — Zip — Country

7. 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
LEBOWITZ, WALTER B
12555 BISCAYNE BLVD
SUITE 924
MIAMI BEACH FL 33181

10. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City — FL — Zip Code

11. Pursuant to the provisions of Section 607.0502 and 607.1008, 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 — DATE

12. OFFICERS AND DIRECTORS

TITLE: DP
NAME: FLEISCHMANN, JURGEN
STREET ADDRESS: 400 S POINT DR SUITE 1608
CITY-ST-ZIP: MIAMI BEACH FL 33130

TITLE: S
NAME: MACASAET, VERONICA
STREET ADDRESS: 200 N 12TH ST #7K
CITY-ST-ZIP: NEW YORK NY

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

ORE034 (10/97)

4000025711154
-06/24/98--01065--003

14. I hereby certify that the information supplied with this filing, and to the best of my knowledge, believe, and belief, it is true, complete, and accurate. I further certify 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 is added in Block 13 with an address.

SIGNATURE: 4-27-98 (305)534-0000