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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P96000072884 (5)

MR. "B" III, INC.

Principal Place of Business	Mailing Address	 <u> </u>	
275 EAST 10TH AVE HIALEAH FL 33010 US	275 EAST 10TH AVE HIALEAH FL 33010 US		
2. Principal Place of Business	2a. Mailing Address		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		

FILED Jan 23 1998 8:00am Secretary of State



US	30010	US				DO NOT WRITE IN THIS SPACE			
-		•	00		3. Date Incorporated or Qualified				
						09/03/1996		<u> </u>	
2. Principal Pl	Principal Place_of Business 2a. Mailing Address					4. FEI Number	Ap	plied For	
21		26				65-0690746	No	t Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.		Suite, Apt. #, etc.					\$8.75	Additional	
22					5. Certificate of Status Desired	Fee Re	quired		
City & State City & State		-			6. Election Campaign Financing	\$5.00	May Be		
23		28				Trust Fund Contribution	Added to Fees		
Zip	Country	Zip	Zip Country			8. This corporation owes or has paid the curre	ent vear Int	angible	
24	25	29	30] No	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent									
RE	SEN, MILTON			31 Na	me				
	00 NE 120TH RD		L.						
	MIAMI FL 33181		[82 Street Address (P.O. Box Number is Not Acceptable)					
IA.	MIMMI PL 33 10 I		-	83					
			[34 Cit	У	FL	85 Zip (Code	
11. Pursuant	to the provisions of Sections 607.0502	and 607,1508, Florida Statute	s, the ab	ove-nar	ned corpor		changing its	s registered	
office or re agent. I a	egistered agent, or both, in the State o m familiar with, and accept the obligati	f Florida. Such change was a ions of, Section 607.0505, Flo	uthorized rida Statu	by the tes.	corporation	ration submits this statement for the purpose of n's board of directors. I hereby accept the appo	intment as	registered	
SIGNATURE	Signature, lyped or printed name of registered agent	and title it applicable (NOTE	Registered	Agent sign	nature required	when reinstating) DATE			
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	S IN 12	
TITLE	D	DELETE	1,1 TITE	E	T		Change	■ Addition	
NAME .	BESEN, MILTON		1.2 NA	4E	1				
STREET ADDRESS	2000 N.E. 120TH ROAD		1.3 STB	EET ADOR	ESS				
CITY-ST-ZIP	NORTH MIAMI FL 33181			-ST-ZIP	``			Í	
TITLE	D	DELETE	2.1 1111		_		Change	Addition	
NAME	BESEN, HARRIETT	_	2 2 NAM				_	_	
STREET ADORESS	2000 N.E. 120TH ROAD		2.3 STREE		ree				
,	NORTH MIAMI FL 33181				1			}	
CITY-ST-ZIP TITLE	NOTTH MIXIWITE 33101	☐ DELETE	3,1 TITL	Y-ST-ZIP			Change	Addition	
						•	onenge		
NAME			3.2 NAM		j			ļ	
STREET ADDRESS			3.3 STR	EET ADDR	ess			-	
CITY-ST-ZIP				Y-ST-ZIP			Later	1	
TITLE		☐ DELETE	4,1 TiTL			Į	Change	Addition	
NAME			4. 2 NA	ΜE					
STREET ADDRESS			4.3 STR	EET ADDR	ESS				
CITY-ST-ZIP			4.4 CIT	-\$T-ZIP					
TITLE		☐ DELETE	5.1 TITE	Ε			Change	Addition	
NAME			5.2 NAN	IE					
STREET ADDRESS		i	5.3 STR	EET ADDR	ess			ĺ	
CiTY-ST-ZIP			5.4 CIT	-ST-ZIP					
TITLE		☐ DELETE	6.1 TITL	E	7		Change	Addition	
NAME			6.2 NAN	ŀΕ	1			ł	
STREET ADDRESS				EET ADDR	ESS		—		
CITY-ST-ZIP			1	-ST-ZIP					
	artifu that the information cumplied with	this filling does not qualify fo			tated in S	ection 119.07(3)(i), Florida Statutes. I further cen	tify 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: