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May 06 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 # P96000080279 (8)

1. Corporation Name
M. DEMKO, INC.

Principal Place of Business
4843 SW 45TH AVENUE
FORT LAUDERDALE FL 33314

Mailing Address
4843 SW 45TH AVENUE
FORT LAUDERDALE FL 33314-5660



2. Principal Place of Business
21 5450 S. STATE ROAD 7

2a. Mailing Address
26 5450 S. STATE ROAD 7

22 Bay 41B

27 Bay 41B

23 Ft. Lauderdale, FL

28 Ft. Lauderdale, FL

24 33314

29 33314

9. Name and Address of Current Registered Agent
DEMKO, MARY A
4843 SW 45TH AVENUE
FORT LAUDERDALE FL 33314

30 Broward

3. Date Incorporated or Qualified
09/27/1996

3a. Date of Last Report

4. FEI Number
65-D702468

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name Demko, Mary A.
82 Street Address (P.O. Box Number is Not Acceptable)
5450 S. STATE ROAD 7
83 Bay 41B
84 City Ft. Lauderdale FL 85 Zip Code 33314

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)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	DELETE
NAME	DEMKO, MARY A	
STREET ADDRESS	4843 SW 45TH AVENUE	
CITY - ST - ZIP	FORT LAUDERDALE FL 33314	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D P	Change	Addition
1.2 NAME	Demko, Mary A.		
1.3 STREET ADDRESS	5450 S. STATE ROAD 7 Bay 41B		
1.4 CITY - ST - ZIP	Ft. Lauderdale, FL 33314		
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 #

0273929

CR2E034 (9/96)