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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 21 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000083315 (7)

M.G. DELIVERY AND ASSEMBLY, INC

Principal Place 9250 BW 144TI MIAMI FL 3318	H PL	Mailing Address 8250 SW 144TH PL MIAMI FL 33186-1085				Date Incorporated or Qualified	3a. Date of La	
4						10/09/1996		
	ace of Business	2a. Mailing Address				4. FEI Number 1/19772	9	Applied For
Sulte, Apt.	#, etc.	26 Suite, Apt. #, etc.				15 W/10	<b>/</b>	Not Applicable 75 Additional
22		27				5. Certificate of Status Desired		e Required
City & State	9	City & State			} '	Election Campaign Financing     Trust Fund Contribution	\$5	.00 May Be ded to Fees
Zip	Country	Zip	Coun	ry		8. This corporation has liability for	intangible tax und	
24 :	9, Name and Address of Curr	29	30			Florida Statutes  0. Name and Address of New Ro	Yes No	
1400		eur Pedistered Wästir	8	1 Name		U. Name and Address of New Hi	aðisteleg Aðelit	
MERO, CARLOS A 9250 SW 144TH PL			-	2 Stree	Address	ddress (P.O. Box Number is Not Acceptable)		
MIA			_	Address (P.O. Box Number is Not Acceptable)				
			le	3				
			E	4 City			FL 85	Zip Code
agent. I a	m familiar with, and accept the ob- Signature, typed or printed name of registered	ligations of, Section 607.0505, Fl agent and title if applicable (NO AND DIRECTORS	Jorida Statul	es.		tion submits this statement for the s board of directors. I hereby accention tensialing to the hon reinstating to the ADDITIONS/CHANGES TO OFFI	DATE CERS AND DIREC	TORS IN 12
TITLE	D	DELETE	1.1 TITL		}		☐ Cha	nge 🔲 Addition
STREET ADDRESS	MERO, CARLOS A 9250 SW 144TH PL.		1.2 NAM	E Et address				
CITY-ST-ZIP	MIAMI FL 33186		1.4 CITY					
TITLE	0	DELEJE	2.1 HIL				Cha	nge Addition
NAME STREET ADDRESS	MERO, MARIA G 9250 SW 144TH PL.		2.2 NAM	E Et address				
CITY-ST-ZIP	MIAMI FL 33186		1	'-ST-ZIP	1			
TITLE		DELETE	3.1 TITE			**************************************	☐ Cha	nge 🔲 Addition
NAME			3.2 NAM		1			
STREET ADDRESS CITY-ST-ZIP				et address '- St-Zip				
TITLE	<del></del>	DELETE	4.1 THL		-		Cha	nge 🔲 Addition
NAME			4. 2 NAN	IE .				
STREET ADDRESS				E1 ADDRESS				
TITLE		DELETE	4.4 C/TY 5.1 Till (		ļ		Cha	nge Addition
NAME			5.2 NAM		]			
STREET ADDRESS			5.3 STRE	et address				
CITY-ST-ZIP		☐ DELETE	5.4 City 6.1 Titl				☐ Cha	nge Addition
NAME		L_J DILLIE	6.1 IIILI				ن این	ugo C Municipii
STREET ADDRESS			1	E1 Address				
CITY-ST-ZIP		end out and the	6.4 CITY			0.0000000000000000000000000000000000000		
Informatio	by certify that the information supp in Indicated on this annual report of fficer or director of the corporation in Block 12 or Block 13 if changed,	or supplemental annual report is or the receiver or trustee empoy	true and ac vered to ex-	remption curate an ocute this	stated in t id that my report as	Section 119.07(3)(i), Florida Statute signature shall have the same leg required by Chapter 607, Florida	es. I further certify at effect as if mad Statutes; and that	that the e under oath; tha thy name