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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000083708

1. Corporation Name

FILED Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90206 006 ***150.00

MEGA-11	HADE PHODUCIS, INC.						
Principal Place	e of Business	Mailing Address			4 (Antion) und incia actic sorie ancie annie marie	10106 51151 12011	43101 (811 1891
1600 N.W. 106T CORAL SPRING		1600 N.W. 106TH TERRACE CORAL SPRINGS FL 33071					
COUNTE OF MINOS TE SOOT					DO NOT WRITE IN THIS	SPACE	
					3. Date Incorporated or Qualifed		
					10/07/1996		
·	lace of Business	2a. Mailing Address			4. FEI Number		plied For
21		26			65-0701082	\$8.75	t Applicable
	Suite, Apt. #, etc.				5. Certifcate of Status Desired	Fee Re	
22	27				Signature Communicat Sinceration	\$5.00	
City & State	e	City & State			6. Election Campaign Financing Trust Fund Contribution	Added	• 1
Zip	Country	Zip	Country		8. This corporation owes the current year in		
├ ─ `	25	·	30	•	Personal Property Tax.	Z Yes	□No
24	9. Name and Address of Curre		701		10. Name and Address of New Registered	Agent	
	3. 10.10 21.0 1.0 2.0 2.0		81	Name			
BARI	Bosa de Almeida, rita sani	DRA	-		(D.O. Day Niverbox in Not Acceptable)	_	
1600	N.W. 106TH TERRACE		82	Street A	ddress (P.O. Box Number is Not Acceptable)		}
COR	AL SPRINGS FL 33071		83		•	_	
			84	City	FL	85 Zip	Code
				1	1 1		
office or r agent. I a	to the provisions of Sections 607.05 egistered agent, or both, in the Statum familiar with, and accept the oblig	e of Florida. Such change was au	ithorized by	the corpor	corporation submits this statement for the purpose of ration's board of directors. I hereby accept the appo	changing its intment as re	registered gistered
office or r	registered agent, or both, in the Stati m familiar with, and accept the oblig Signature, typed or printed name of registered ag	e of Florida. Such change was au gations of, Section 607.0505, Flori gent and title if applicable. (NOTE: I	thorized by ida Statutes	the corpor	corporation submits this statement for the purpose of ration's board of directors. I hereby accept the apportunity of the purpose of the purp		gistered
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14. I 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, with all other like empowered.

SIGNATURE:

Diz de Control de Cont

3-2-99

(954) 345-6649