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 # 1. Corporation Name P96000090969 (2)

M&P	INVESTMENT HOLDING CO	RP.			XII 4617
Principal Plac	e of Business	Mailing Address		{ 1,060,460,146,161,16,63,44,663,4,663,4,663,4,663,4,663,4	NI BAND WING BING 1814 1884
3465 N.W. SECOND AVENUE 3465 N.W. SECOND AVENUE MIAMI FL 33127				DO NOT WRITE IN THIS	SPACE
				3. Date incorporated or Qualified	· · · · · · · · · · · · · · · · · · ·
				11/06/1996	
personal in the first term of		2s. Mailing Address		4. FEI Number	Applied For
Suite, Apt.	# etc	Suite, Apt. #, etc.		65-07-10274	Not Applicable \$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the cu	
24	_ 25	29	30	Personal Property Tax due June 30.	Yes No
				10. Name and Address of New Registered	Agent
	JONT & NEIMAN, P.A.		81 Name		
ONE BISCAYNE TOWER, #3550		82 Street Add	ress (P.O. Box Number is Not Acceptable)		
TWO SOUTH BISCAYNE BLVD.			83		
MIAMI FL 33131					
			84 City	Fl	
office or r agent. I a SIGNATURE				poration submits this statement for the purpose tion's board of directors. I hereby accept the ap	pointment as registered
40	Signature, typed or printed name of registered agen		TE: Registered Agent signature requi		D DIRECTORS IN 10
12.	OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
NAME	GERRITS, MICHAEL J		1.2 NAME		
STREET ADDRESS	3465 N.W. SECOND AVENUE		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33127		1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	GERRITS, PATRICK T		2.2 NAME		
STREET ADDRESS	3465 N.W. SECOND AVENUE		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33127		2. 4 CITY+ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. CITY - ST - ZIP 4.1 TITLE		Change Addition
NAME		L. Pacall	4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		İ
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE	· · ·	☐ Change ☐ Addition

CITY-ST-ZIP 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 exacting 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 exacting the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of the corporation of the corporation or the receiver of the corporation or the receiver of the corporation or the receiver of the corporation of the corpor

6.4 CITY-ST-ZIP

6.2 NAME

STREET ADDRESS

FILED

Mar 05 1998 8:00am

Secretary of State