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 # P96000101776 (8)

MLH FINANCIAL SERVICES II, INC.

Mailing Address

FILED May 14 1998 8:00am Secretary of State



Principal Place of Business 1311 N CHURCH AVENUE TAMPA FL 33607 1311 N CHURCH AVENUE TAMPA FL 33607 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/17/1996 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable 52-2015572 Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zio Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes Yes 24 25 29 30 Personal Property Tax due June 30. ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent HABER, RICHARD M 1311 N CHURCH AVE 82 Street Address (P.O. Box Number is Not Acceptable) **TAMPA FL 33607** 83 City 85 Zip Code 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, 1 am familiar with, and accept the obligations of. Section 607.0505, Florida Statutes. SIGNATURE Signature, typod or printed name of registrated agent and title if inpplicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DVST DELETE Change Addition TITLE 1.1 TITLE MCDONALD, ROBERT L JR NAME 1.2 NAME 1311 N CHURCH AVENUE STREET ADDRESS 1.3 STREET ADDRESS **TAMPA FL 33607** 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 21 TITLE ☐ Change Addition TITLE NAME HABER, RICHARD M 2.2 NAME 1311 N CHURCH AVE STREET ADDRESS 2.3 STREET ADDRESS **TAMPA FL 33607** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-7IP DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change ___ Addition TITLE 5.1 THUE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

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 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 or trustee employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in on an attachment with an address. 14. I hereby certify that the informati indicated on this annual report of officer or director of the corpor Block 12 or Block 13 if change