

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 23, 1999 8:00 am  
Secretary of State

04-23-1999 90114 016 \*\*\*150.00

DOCUMENT # P96000102870

1. Corporation Name  
THE MENGAR GROUP, INC.

Principal Place of Business  
3686 W. 12TH AVE.  
HIALEAH FL 33012

Mailing Address  
3686 W. 12TH AVE.  
HIALEAH FL 33012

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
12/23/1996

4. FEI Number  
65-0785830

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 owes the current year Intangible  
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30

9. Name and Address of Current Registered Agent

GARCIA, ELOY JR.  
9910 SW 147 ST.  
MIAMI FL 33176

10. Name and Address of New Registered Agent

81 Name ELOY GARCIA JR  
82 Street Address (P.O. Box Number is Not Acceptable)  
83 976 SW 180 TER  
84 City PEMBROKE PINES FL 85 Zip Code 33029

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 DP  
NAME MENDIZABAL, NICOLAS O JR.  
STREET ADDRESS 10060 SW 145 TER.  
CITY-ST-ZIP MIAMI FL 33176

TITLE DSTV  
NAME GARCIA, ELOY JR.  
STREET ADDRESS 9910 SW 147 ST.  
CITY-ST-ZIP MIAMI FL 33176

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DP  
1.2 NAME NICOLAS O MENDIZABAL JR  
1.3 STREET ADDRESS 4350 N BAY RD  
1.4 CITY-ST-ZIP MIAMI BEACH FL 33140

2.1 TITLE DSTV  
2.2 NAME ELOY GARCIA JR  
2.3 STREET ADDRESS 976 SW 180 TER  
2.4 CITY-ST-ZIP PEMBROKE PINES FL 33029

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 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 attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED

04/20/99 3057 534-6617

Date

Daytime Phone #

CR2E034 (11/98)