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 # P97000015666 (5)

MEDALLION INVESTMENT ASSOCIATES, INC.

Principal Place of Business

Mailing Address

FILED Apr 24 1998 8:00am Secretary of State



1505 N.W. 167TH STREET MIAMI FL 33169		1505 N.W. 167TH STREET Miami Fl 33169		DO NOT WRITE IN	THIS SPACE		
					3. Date Incorporated or Qualified	THIS OF ACL	
					02/17/1997		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Ar	plied For
21		26 755 Boardman-Canfield Rd.		65-0738469	No	ot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75		
22						Fee Re	equired
City & State		City & State			6. Election Campaign Financing	\$5.00	May Be
23		Youngstown, Ohio		Trust Fund Contribution			
Zip	Country	Zip	Count	•	8. This corporation owes or has paid t		
		29 44512	30 U.S.A.		Personal Property Tax due June 30. X Yes No 10. Name and Address of New Registered Agent		
SPARKMAN, KENDALL				Traine			
) Sou th Biscayne Blvd. I TE 2 500		82 Street Add		ess (P.O. Box Number is Not Acceptable)		
	AMI FL 33131-2336		6	3			
			8	4 City	**************************************	85 Zip	Code
		0				FL S ZIP	
office or re	egistered agent, or both, in the State	of Florida. Such change was -	authorized	by the corporati	oration submits this statement for the purp ion's board of directors. I hereby accept the	ne appointment as	registered
agent. I am lamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE	Signature, typed or printed name of registered age	ot and title if angle able (Nin)	E: Registered	gent signature require	ed when reinstation)	DATE	
12.	OFFICERS AND		13,	gent algratore requir	ADDITIONS/CHANGES TO OFFICER		RS IN 12
TITLE	D	☐ DELETÉ	1.5 TITL		v/s	Change	X Addition
NAME	EPSTEIN, DAVID		1.2 NAM	E	.,_		
STREET ADDRESS	1505 N.W. 167TH STREET		1.3 STRE	ET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33169		1.4 CITY	- ST - ZIP			
TITLE	D	☐ DELETE	2.1 TITL		V	Change	X Addition
NAME	GORDON, MARK		2.2 NAM	E			
STREET ADDRESS	1505 N.W. 167TH STREET		2.3 STRE	ET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33169		2.4 CIT	/-ST-ZIP			
TITLE	D	☐ DELETE	3.1 TITL		P/T	☐ Change	X Addition
NAME	Kosar, Bernard Jr.		3.2 NAM	E			
STREET ADDRESS	1505 N.W. 167TH STREET		3.3 STR	ET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33169		3.4. CIT	(-ST-ZIP			
TITLE	DELETE. 4.1 T		4.1 TITU	E		Change	Addition
NAME			4, 2 NAN	AE .			
STREET ADDRESS			4.3 STR	ET ADDRESS			
CITY-ST-ZIP				- ST- ZIP			
TITLE		DELETE 5.1 TIT				☐ Change	Addition
NAME			5.2 NAM				
STREET ADDRESS			1	ET ADDRESS			
City-St-ZiP				-ST-ZIP		Channa	Addition
TITLE	•		6.1 TITL			L_ Change	L.J. Addition
NAME			6.2 NAM				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP		th this filing does not qualify f		- \$1 - ZIP	Section 110 07/2(i) Florida Statutos I fur	ther eastly that the	

4. I hereby certify that the information supplied with this filling 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 recover 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 it changed, or on an anadament with an address.

1)ent h

4/20/98

32E034 (10/97)