FILE NOW: FILING FEE AFTER MAY 1ST IS \$50.00

PROFIT CORPORATION **ANNUAL REPORT**



Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

P97000032881 (9)

MCINERNEY ENTERPRISES, INC.

FILED Feb 25 1998 8:00am Secretary of State

Principal Flace of Business		Mailing Address		
420 SE 14TH AVE POMPANO BEACH FL 33062		420 SE 14TH AVE. POMPANO BEACH FL 33062		
FOMENNO DENOTE PE SOUR		POMPANO BENCH PE 33002		DO NOT WRITE IN THIS SPACE
ì				3. Date incorporated or Qualified
				04/11/1997
2 Principal Pi	ace of Business	2a. Mailing Address		FEI Number Applied For
21	aree of pushicos	·1		65-0748945 Not Applicable
Suite, Apt #, etc.		Suite, Apt #, etc.	· · · · · · · · · · · · · · · · · · ·	\$8.75 Additional
		h1		5. Certificate of Status Desired Fee Required
City & State		City & State		
		·		6. Election Campaign Financing \$5.00 May Be
23		28]		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	This corporation owes or has paid the current year Intangible
24	[25]	[29]	30	Personal Property Tax due June 30.
	g, Name and Address of Curren	it Hegistered Agent	04 \ \	10. Name and Address of New Registered Agent
SANCHEZ, DOLORES K				
4701 N. FEDERAL HIGHWAY 82 Street Address (P.O. Box Number is Not Acceptable)				
SUITE 216			4	20 SE. 14th RU.
u	GHTHOUSE POINT FL 33064		83	
			24 2	
			84 City	FL 85 Zp Code
11 Pursuant t	o the provisions of Sections 607 050	2 and 607 1508 Florida Statute	es the above-named cor	rpolation 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.				
agent I am familiar with, and accord the obligations of Section 607.0505, Florida Statutes.				
SIGNATURE .	Signature by held or printed harde of reger here targe	1 murry		x d-17-78
	Signaturi hyded ox printed han e ot rege tene tage OFTICE HS ANI		Registered Agent signature requ	
12.	D OF TOT HIS MINI	DELETE	13. 11 THTLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
i	_			Change 17 Application
NAME	MCINERNEY, MICHAEL		1.2 NAME	
STREET ADDRESS	420 SE 14TH AVE.		1.3 STREET ADDRESS	
CITY-ST-ZIP	POMPANO BEACH FL 3306		1.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	MCINERNEY, PATRICIA		2.2 NAME	
STREET ADDRESS	420 SE 14TH AVE.		2 3 STREET ADDRESS	i
CfTY-ST-ZIP	POMPANO BEACH FL 3306	2	2.4 CITY-ST-ZIP	
TITLE		DELETE	3.1 TITLE	Change Addition
NAME		_	3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
1 1				Į.
CITY-ST-ZIP		DELETE	3.4 CITY-ST-ZIP 4.1 TITLE	Change Addition
TITLE		T Direct		Li cuente (mi vocitori
NAME			4 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY - ST - ZIP	
TIFLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	1
STREET ADDRESS			5 3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY - ST - ZIP	ļ
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	_ · <u>-</u>
STREET ADDRESS			6.3 STREET ADDRESS	
1				
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

14. Thereby 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.