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

**PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham **ANNUAL REPORT** Secretary of State 1998 DIVISION OF CORPORATIONS

**FILED** May 11 1998 8:00am Secretary of State

DOCUMENT # P97000035022 (7)				
MAHN	INDUSTRIES, INC.			
Principal Place	ce of Business Mailing Address		- 1	
T2 18 0000				
-PINELLAS PA	NAK FL 83782 PINELLAS PARK FL 83782		DO NOT WRITE IN THI	¢ ¢DACE
	7301-55 <sup>th</sup> Street		3. Date Incorporated or Qualified	3 31 ACL
	Pineilas Pancifi. 3	3781	04/18/1997	
2. Principal F	Place of Business 2a, Mailing Address	<u> </u>	4. FEI Number	Applied For
21 730	of 55th Street 26 same a	25 # 2	1 65-07/03470	Not Applicable
Suite, Apt	<u> </u>		5, Certificate of Status Desired	\$8.75 Additional
City & Sta	te City & State	· · · · · · · · · · · · · · · · · · ·		Fee Required
23 6 6	ellas Park 7L 20		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
<b>⋥</b> ′Ѯऌ	Pionitry Pionitry	Country	8. This corporation owes or has paid the o	
24 35 1	25 1 W (25 29 30 30 Name and Address of Current Registered Agent	<u> </u>	Personal Property Tax due June 30.  10. Name and Address of New Registere	Yes No
ЦЕ	RSEM, THOMAS G	81 Name	10. Harris and Address of Host Hogistory	a Agont
14	21 CT. ST., STE. B	82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
CLEARWATER FL 34616		5treet Addin	ess (P.O. Box Number is Not Acceptable)	
		83		
		84 City	_	85 Zip Code
44 0	1. H		F	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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 Statutos.				
SIGNATURE	•			
		egistered Agent signature require		
TITLE	OFFICERS AND DIRECTORS  DELETE  DELETE	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12 Change Addition
NAME -	HAHN CAROL	1.2 NAME		Li cuange Li Apolition
STREET ADDRESS	9000 64 6T. N.: 7301 SSTA STORET	1.3 STREET ADDRESS		8
CITY-ST-ZIP	PINELLAS PARK FL 33782 PIANTAS TOUK F	_1.4 C/TY - S1 - ZIP		
TITLE	337 DI DELETE	2.1 TITLE		Change Addition
NAME	ا ۱۹ در	2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		}
CITY-ST-ZIP		2. 4 CITY - ST - ZIP		
TITLE	DELETE	3.1 TITLE		Change Addition
NAME STREET LODDESS		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	- Control of the cont	4. 2 NAME		C cuande C vanimum
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		
CITY-ST-ZIP		5.4 CITY - ST - ZIP		
TITLE	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	1,	6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		,
CITY-ST-ZIP	certify that the information supplied with this fitting does not qualify for the	6.4 City-St-ZIP	Section 110 07/2VI) Elevida Ciatutas I funda-	nastifu that the information
16. 1 RS(U)V (	aceure nancolo natomanum suponeu wan mas minu does noi bugiily loi ti	ie exemunon stated in S	aecour (19.07.50) FIONA STADITES FORTBAL	Certify that the intormation

indicated on this annual report or supplied with this ming over not quality for the exemption stated in section 119.07(3)(j), Florida Statutes. Further certify that the informatio indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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.