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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENTI OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P97000068589 (5)

MCMULLEN & SON, INC.

Principal Place of Business Mailing Address 1357 W. GLENN OAK ROAD 1357 W. GLENN OAK ROAD NORTH LAUDERDALE FL 33068 NORTH LAUDERDALE FL 33068

## **FILED** Apr 10 1998 8:00am Secretary of State



2. Principal I	Place of Business	2a. Mailing Address				4. FEI Number	A	pplied For	
21		6				65-0776356	N	lot Applicable	
Suite, Apt	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional	
22		27				5. Certificate of Status Desired	Fee F	lequired	
City & State		City & State				6. Election Campaign Financing	\$5.00	May Be	
23		28				Trust Fund Contribution		to Fees	
Zip	Country	Zip Coun				B. This corporation owes or has paid the current year Intangible			
24	25	29 30				Personal Property Tax due June 30. 🔲 Yes 🔲 No			
g, Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
VIVIES, PATRICK C.P.A. 721 S.E. 17TH STREET FORT LAUDERDALE FL 33316				Name					
				82 Stree		ss (P.O. Box Number is Not Acceptable)			
				•	Onvol Addisos (1.0. Dox Humber is Not Acceptable)				
				3					
			-						
				4	City	FL	<b>85</b> Zip	Code	
11. Pursuant to the provisions of Socious 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. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.									
SIGNATURE Signature, typied or printed name of registered agent and tale if applicable (NOTE: Registered Agent signature required when re-instating) DATE									
12.	OFFICERS AND I		13.	9	olgridate to qui te cr	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	RS IN 12	
TITLE	P/D	DELETE	11 TITLE		T		Change	Addition	
NAME	RHEAL MAURICE MC M	III I EM	1.2 NAME	E				_	
STREET ADDRESS	1357 W. GLEN OAK ROAD			1.3 STREET ADDRESS					
CITY-ST-ZIP	NORTH LAUDERDALE, FL 33068			1.4 CITY - ST - ZIP					
TITLE	V DELETE 2			2.1 TITLE			Change	Addition	
NAME	MACK MC MULLEN			2.2 NAME			pilanga		
STREET ADDRESS				2.3 STREET ADDRESS					
CITY-ST-ZIP	NORTH LAUDERDALE,	F1 33048		2. 4 CITY - ST - ZIP					
TITLE	1/S DELETE			3.1 TITLE			Change	Addition	
NAME	MICHELINE MC MULLEN			3.2 NAME			onungti		
STREET ADDRESS	1959 61 00			3.3 STREET ADDRESS					
CITY-ST-ZIP	NORTH LAUDERDALE, FL. 33068			3.4. CITY - ST - ZIP				İ	
TITLE	DELETE			4.1 11TLE			Change	Addition	
NAME	- Marie			4. 2 NAME			C Change		
STREET ADDRESS					000100				
			4.3 STREE		ı			1	
CITY-ST-ZIP TITLE		DELETE	4.4 C(1)Y		ZIP		Chanca	Addison	
NAME			5.1 TITLE		1		Change	☐ Addition	
			5.2 NAME						
STREET ADDRESS			5.3 STREE		1				
CITY-ST-ZIP		Distre	5.4 CHY-		ZIP		<b>—</b>		
TITLE		DELETE	61 TITLE				☐ Change	☐ Addition	
NAME			62 NAME					1	
STREET ADORESS			63 STREE	EI AI	DDRESS				

64 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 of pupplemental 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 carporation of 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, good an affectment with an address.

JAN 5. 1998

(954) 748-7008