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

PROFIT CORPORATION ANNUAL REPORT

1**9**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Martham -

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

P97000074426 (2)

MALVIC, INC.

Principal Place of Quainess

Mailing Address

FILED May 21 1998 8:00am Secretary of State



4/13/98

COCONUT CREEK FL 33063		COCONUT CREEK FL 33063			DO NOT WRIT	E IN THIS SPACE
					3. Date Incorporated or Qualified	
					. 08/27/1997	
2. Principal F	lace of Business	2a. Mailing Address		····	4 FEI Number	_ Applied For
21 SQ/ N		26			165-07797	Not Applicable
Suite Ant	# etc	Suite, Apt. #, etc.				- \$9.75 Additional
22 No. M City & Stat	AMI BEACH, FL.	City & State			6 Certificate of Status Desired	Fee Required
23 \$3/2	_	28			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip ¯	Country	Zip	Coun	try	8. This corporation owes or has p	
24	25 DADE	[29]	30		Personal Property Tax due Jun	
	9. Name and Address of Currer	it Hegistered Agent		Name .	10. Name and Address of New R	·
	API, FARRELL		•	Ivame Z	EONARD OSHINSK	y
4	1745 N.W. 22ND STREET		Įε	2 Street Ac	dress (P.O. Box Number is Not Accepta	ble)
C	COCONUT CREEK FL 33063		ļ <u>.</u>	1/50	DE. HALLANDALE BEL	CH BLUD.
			8	3		
	<i>(</i>		8	4 City	0110×3015	85 Zip Code
					gllandale	FL 33009
11. Pursuant	to the provisions of Sections 607,050 registers (Nagent, or both, in the State	l2 and 607-1508, Flori da Stat ut Lof Florida, Such change was :	es, the abo authorized	ve-named or by the corpo	orporation submits this statement for the ration's board of directors. I hereby accuration's	purpose of changing its registered
agent. (a	am familia with, and accomplish oblig	ations of Section 607.0505, Flo	orida Statul	.08.	ration's board of directors. I hereby acco	I / I
SIGNATURE	Depres Shu	eny			<i>\(\frac{\psi}{2}\)</i>	13/90
				gent a gnature to	quired wher reinstating)	MATE
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	
TITLE	D	DIT DELETE	1.1 TITLE	<u> </u>	- TEE	Change Addition
NAME	LAPI, FARRELL		1.2 NAM	E 🖣	SÉANNE DEE POINTE. 1994 LANE NO. MIANI BERCH, FC.	•
STREET ADDRESS	4745 N.W. 22ND STREET		1.3 STRE	ET ADDRESS 🎝	DINGE. 199 - CANE	'
CITY-ST-ZIP	_COCONUT CREEK FL 3306		1.4 CITY	-ST-ZIP	VO. MIRMI BERCH, FL.	33177
TITLE		☐ DELETE	2.1 TITLI		•	Change Addition
NAME			2.2 NAM	E		
STREET ADDRESS			2.3 STAE	EFT ADDRESS		'
CITY-ST-ZIP			2. 4 CITY	(-ST-ZIP		
TITLE		DELETE	3.1 1(1)			Change Addition
NAME			3.2 NAM	E		
STREET ADDRESS			3.3 STRE	ET ADDRESS		
CITY-ST-ZIP			3.4 CITY	(- ST - ZIP		
TITLE		DELETE	4.1 TITL			Change Addition
NAME	1		4 2 NAM	IE .		
STREET ADDRESS			4.3 STRE	et address		
CITY-ST-ZIP			4.4 CITY	- ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAM	E		
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP			5.4 CITY			
TITLE		DELETE	6.1 THE			Change Addition
NAME			6.2 NAM	!	7000025 3 -0\$/22/98010	33117 911
STREET ADDRESS				ET ADDRESS	-05/22/98010	43014 Y / \\
					***150.00) w <
CITY-ST-ZIP	certify that the information supplied w	ith this filing does not qualify fo	6.4 CHY		in Section 119.07(3)(i), Florida Statutes.	I further certify that the information
indicated	i on this a nnual report or supplementa	tliannual report is true and ac c	curate and t	hat my signa	ture shall have the same legal effect as	if made under oath; that I am an
officer or	director of the corporation or the rec-	civer or trustee empowered to	execute thi	s report as re	equired by Chapter 607, Florida Statutes	; and that my name appears in