## 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 # P97000079408 (5)

N. KENDALL DR.: #C-110	9894 N. KENDALL DR., #C-110		
MI FL 33176	9894 N. KENDÁLL DR., #C-110 MIAMI FL 33176		
rincipal Place of Business	2a. Mailing Address		

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

MAGIC	CITY PARKING INC.			1 18 6/4661 110 LB111 18611 80111 60114 86111 001	H ARRIA HAHIR ANAM AAKAN TAN NAAN	
Principal Plac	e of Business	Mailing Address		t santrant litt tarts fants affit Abilt Entit Mil	) 10010 1914 BIBN 00101 1914 1691	
	DALL DR. #C-110	9894 N. KENDALL DR., #	C-110			
MIAMI FL 33176 MIAMI FL 33176				DO NOT WRITE IN TI	HIS SPACE	
				3. Date Incorporated or Qualified		
				09/12/1997		
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		65-0774157	Not Applicable	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
City & Stat		City & State	<del></del>		Fee Required	
23	θ	<del>-</del> ¬ ′		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be	
Zip	Country		Country	8. This corporation owes or has paid the	Added to Fees	
24	25		30	Personal Property Tax due June 30.	Yes No	
<del></del>	9. Name and Address of Curre			10. Name and Address of New Registe		
MC	ORA, MICHAEL D		81 Name OF	RLANDO ARROM		
9894 N. KENDALL DR., #C-110			1 1	R2 Street Address (P.O. Roy Number is Not Assentable)		
	AMI FL 33176		or or it	1556 NW 26th Street.	e <u>. 20</u> 3	
			83			
	$\wedge$		84 City		B5 Zip Code	
			' 1	fiami	=L     122172	
office or r agent. I a SIGNATURE	registered agent, or bolly, in the statum familiar with, and accept the obli-	ORL	athorized by the corporal ida Statutes.  ANDO ARROM  Registered Agent signature requ	poration submits this statement for the purportion's board of directors. I hereby accept the	<u> </u>	
12.	_ <del></del>	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS		
TITLE	D	☐ DELETE	1.1 TITLE		Change Addition	
NAME	MORA, MICHAEL D	446	1.2 NAME			
STREET ADDRESS	9894 N. KENDALL DR., #C-	110	1.3 STREET ADDRESS			
CITY-ST-ZIP TITLE	MIAMI FL 33176	DELETE	1.4 CITY-ST-ZIP		Change Addition	
NAME	NICOT, CARLOS R	נ_ן טנננונ	2.1 TITLE 2.2 NAME		C Cusude T Vannou	
STREET ADDRESS	9421 SW 106 AVE		2.2 NAME 2.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33176		2 4 CITY-ST-ZIP			
TITLE	WIN (WA 1 & CO 1 1 C	☐ DELETE	3.1 TITLE		Change Addition	
NAME			3.2 NAME		• •	
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY - ST - ZIP	· · · · · · · · · · · · · · · · · · ·		
TITLE		☐ DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP	<u>-</u>		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		DELETE	5.4 CITY-ST-ZIP		Change C Address	
TITLE		☐ DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY - ST - ZIP			

hereby certify that the information of policy 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 propert is the and accurate and that my senature 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 pushes an appears in Block 12 or Block 13 if changes, or only at attribute with a supplemental annual property of the corporation of the corporat

SIGNATURE: