

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Aug 04, 1999 8:00 am
Secretary of State

08-04-1999 90003 021 ***550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000084191

1. Corporation Name

MANUFACTURING HOLDING CORP.



Principal Place of Business

3600 NW 82ND AVE
MIAMI FL 33166

Mailing Address

3600 NW 82ND AVE
MIAMI FL 33166

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/29/1997

2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

4. FEI Number

65-0783444

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year
Intangible Personal Property.

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

O'MEARA, VICKI A
3600 NW 82ND AVE
MIAMI FL 33166

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of sections 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. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input type="checkbox"/> DELETE	1.1 TITLE	P/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LYNOTT, MICHAEL T	1.2 NAME	Michael T. Lynott
STREET ADDRESS	3600 NW 82ND AVE	1.3 STREET ADDRESS	3600 NW 82nd Ave
CITY-ST-ZIP	MIAMI FL 33166	1.4 CITY-ST-ZIP	Miami FL 33166
TITLE	V <input type="checkbox"/> DELETE	2.1 TITLE	V/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BARR, JAMES R	2.2 NAME	James R. Barr
STREET ADDRESS	3600 NW 82ND AVE	2.3 STREET ADDRESS	3600 NW 82nd Ave.
CITY-ST-ZIP	MIAMI FL 33166	2.4 CITY-ST-ZIP	Miami FL 33166
TITLE	VT <input checked="" type="checkbox"/> DELETE	3.1 TITLE	V/T/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HENDRICKS, VERNON L	3.2 NAME	W. Daniel Susik
STREET ADDRESS	3600 NW 82ND AVE	3.3 STREET ADDRESS	3600 NW 82nd Ave.
CITY-ST-ZIP	MIAMI FL 33166	3.4 CITY-ST-ZIP	Miami FL 33166
TITLE	S <input type="checkbox"/> DELETE	4.1 TITLE	S/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MATIAS, MARIA C	4.2 NAME	Maria C. Matias
STREET ADDRESS	3600 NW 82ND AVE	4.3 STREET ADDRESS	3600 NW 82nd Ave.
CITY-ST-ZIP	MIAMI FL 33166	4.4 CITY-ST-ZIP	Miami FL 33166
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 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.

SIGNATURE: *William A. Garcia* **7-28-99 305 500-3593**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (5/99)

600448-9003-21
P 97 0000 84191

06/01/99

MANUFACTURING HOLDING CORP.
(Florida)

OFFICERS

MICHAEL T. LYNOTT	PRESIDENT
JAMES R. BARR	VICE PRESIDENT
W. DANIEL SUSIK	VICE PRESIDENT & TREASURER
MARIA C. MATIAS	SECRETARY
WILLIAM A. GARCIA	ASSISTANT TREASURER

DIRECTORS

JAMES R. BARR
MICHAEL T. LYNOTT
MARIA C. MATIAS
W. DANIEL SUSIK

3600 N. W. 82nd AVENUE
MIAMI, FLORIDA 33166