


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

**FILED**  
Feb 23, 1999 8:00 am  
Secretary of State

02-23-1999 90096 037 \*\*\*150.00

0506459

<b>PROFIT CORPORATION</b> <b>ANNUAL REPORT</b> <b>1999</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P97000084326**

1. Corporation Name  
**MIMAG, INC.**

Principal Place of Business  
**442 FOREST LANE  
KISSIMMEE FL 34746**

Mailing Address  
**442 FOREST LANE  
KISSIMMEE FL 34746**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**09/29/1997**

4. FEI Number  
**59-3474617**

☒ 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 Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 **515 ARCHER LANE**

2a. Mailing Address

26 **515 ARCHER LANE**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 **KISSIMMEE FL.**

City & State

28 **KISSIMMEE FL.**

Zip

24 **34746**

Country

25 **Osceola**

Zip

29 **34746**

Country

30 **Osceola**

9. Name and Address of Current Registered Agent

**MAGRUDER, C. MICHAEL  
200 E. MONUMENT AVENUE  
SUITE C  
KISSIMMEE FL 34741**

10. Name and Address of New Registered Agent

81 Name **JAMES O. GAGG JR.**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**200 E. MONUMENT AVENUE**  
83 **SUITE C**  
84 City **KISSIMMEE** 85 Zip Code **FL 34741**

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 ☐ DELETE

TITLE **D**  
NAME **GELLIS, SEYMOUR M**  
STREET ADDRESS **442 FOREST LANE**  
CITY-ST-ZIP **KISSIMMEE FL 34746**

TITLE **D**  
NAME **GELLIS, MARY ANN**  
STREET ADDRESS **442 FOREST LANE**  
CITY-ST-ZIP **KISSIMMEE FL 34746**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **Gellis, Seymour M.** ☒ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS **515 ARCHER Ln.**  
1.4 CITY-ST-ZIP **KISSIMMEE FL. 34746**

2.1 TITLE **Gellis, Mary Ann** ☒ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS **515 ARCHER Ln.**  
2.4 CITY-ST-ZIP **KISSIMMEE FL. 34746**

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
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 with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (11/98)