

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

FILED  
May 01 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P97000100405 (4)

1. Corporation Name

TEAM MINERAL, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

8001 SW 120 STREET  
MIAMI FL 33156

8001 SW 120 STREET  
MIAMI FL 33156

2. Principal Place of Business

21 9990 S.W. 77 Avenue

Suite, Apt. #, etc.

22 Suite 203

City & State

23 Miami, FL

Zip

24 33156

Country

25 U.S.A.

2a. Mailing Address

26 9990 S.W. 77 Avenue

Suite, Apt. #, etc.

27 Suite 203

City & State

28 Miami, FL

Zip

29 33156

Country

30 U.S.A.

3. Date Incorporated or Qualified

11/25/1997

4. FEI Number

☒ 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 or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

NISONSON, RONALD S  
8001 SW 120 STREET  
MIAMI FL 33156

10. Name and Address of New Registered Agent

81 Name

NISONSON, RONALD S.

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

9990 S.W. 77 Avenue

83

Suite 203

84 City

Miami

FL

85 Zip Code

33156

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

Ronald S. Nisonson

(NOTE: Registered Agent signature required when reinstating)

DATE

4/21/98

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE  
NAME NISONSON, RONALD S  
STREET ADDRESS 8001 SW 120 STREET  
CITY-ST-ZIP MIAMI FL 33156

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

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☐ Addition  
1.2 NAME NISONSON, RONALD S.  
1.3 STREET ADDRESS 9990 S.W. 77 Avenue, Suite 203  
1.4 CITY-ST-ZIP Miami, FL 33156

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

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.

SIGNATURE *[Signature]* Ronald S. Nisonson 4/21/98 (25) 335-1233

CR2E034 (10/97)