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

PROFIT CORPORATION **ANNUAL REPORT**

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P97000108239

1. Corporation Name

MIOA ACQUISITION COMPANY IV, INC.

Principal Place of Business 1903 SOUTH CONGRESS AVE. SUITE 400 Mailing Address

1903 SOUTH CONGRESS AVE. SUITE 400

FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90170 020 ***150.00



BOYNTON BEA	CH FL 33426	•	BOYNTON BEACH FL 33426					DO NOT WRITE IN THIS SPACE			
							 	3. Date Incorporated or Qua			
							ſ	12/26/1997	•		
2. Principal P	lace of Busine	288	2a	Mailing Address				4. FEI Number			pplied For
2. Findipar Flace of Business				26				65-08 18785			ot Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.						·····	Additional
- Suite, Apt. #, etc.				27				5. Certificate of Status Desire	ed 🗀		equired
City & State				City & State				6. Election Campaign Finance	cina —	\$5.00	May Be
23				28			ļ	Trust Fund Contribution			to Fees
Zip		Country		Zip	Country	··		8. This corporation owes the	current year Int	angible	
24	. [25	29	3	0			Personal Property Tax.	•	Yes	□No
- `		and Address of Current	1	red Agent			1	to. Name and Address of N	lew Registered	Agent	
					81	Name	F.	NICHOLAS DAL	115 11	-	
CORPORATION SERVICE COMPANY					82	Street				#14.	
	HAYS ST]	0.,000	190	4P.O. Box Number is Not Act	SAVE	#400	<u> </u>
TALI	.ahassee i	FL 32301			83						
		•			84	l Cibu d		<u></u>		85 Zip	Gode:
		**				E	ユタルス	ON BEALH	FL	.ㅣㅣ그	39 <i>76</i>
11. Pursuant	to the provest	nse Sections 607.9502	and 607	7.1508, Florida Statutes	the abov	heman-e	Corporal	tion submits this statement fo	r the purpose of	changing its	s registered
office or r	egistered age m familiae wil	nt, of both, in the State of	t Florida ans of, S	. Such change was aut Section 607.0505, Florid	norized by la Statutes	tne corpo s.	oration s	board of directors. I hereby	accept the appoi	.unen as re	gistered
	/ 7/	WAHALAS	A	4	NICHO	IAC D	AVIS	. <i>T</i> T	4/2/94	7 .	
SIGNATURE	Signature typed o	printed name of registered agent	and title if a	appiicable. (NOTE: R	egistered Age	nt signature n	required whi	en reinstating)	DATE	<u>, </u>	
12.		OFFICERS AND	DIREC	TORS	13.			ADDITIONS/CHANGES TO	OFFICERS AN	ID DIRECTO	ORS IN 12
TITLE	-PD			☐ DELETE	1.1 TITLE		D		•	Change	☐ Addition
NAME .	PERSHES	PAUL			1.2 NAME		1	•			
STREET ADDRESS		TH CONGRESS AVE,	SUITE	400	1.3 STREE	TADDRESS	1				
CITY-ST-ZIP		BEACH FL 33426			1.4 CITY-5	ST-ZIP	1 .				
TITLE	-87			☐ DELETE	2.1 TITLE		ST	-/0		hange	☐ Addition
NAME	KOBRIN,	AUTHUR			2.2 NAME		' '	1			
STREET ADDRESS		TH CONGRESS AVE.	SUITE	400	2.3 STREE	TADDRESS					
CITY-ST-ZIP		BEACH FL 33426			2. 4 CITY-						,
TITLE	DOTITION	DENOTT L COTEC		☐ DELETE	3.1 TITLE	01-23	7/0	ED PRES		Change	Addition
NAME					3.2 NAME		Buch	ATERI, DANA J.			
STREET ADDRESS					1	T ADDRESS	1952	3 S. CONGRESS AV.	E. #400		
					3.4. CITY-		BOY	WON BEAUT E	point .	3342	6
CITY-ST-ZIP				☐ DELETE	4.1 TITLE	31*21	7/2	EXEC V. PRES	Des Es.	Change	Addition
NAME					4. 2 NAME		12/20	is, E. NICHOLAS	711		
STREET ADDRESS				•		TADDRESS	LATT	3 5, CONGRESS AVE	#400		
CITY-ST-ZIP					4.4 CITY-5	İ	Bo	YNTON BEACH,	5 3342	6	_
TITLE				☐ DELETE	5.1 TITLE),- <u>Z</u> II	77/	SR. V. PRES		Change	Addition
NAME				<u></u>	5.2 NAME						
					5.3 STREE	TADDRESS	190	TOLA, DAVID 3 S. CONGRESS A	IVE #400	>	
STREET ADDRESS	1				5.4 CITY- 5		Roy	WYON BEACH, F	2 33426	,	
CITY-ST-ZIP				☐ DELETE	6.1 TITLE		wi	YOUR DONAT	,	Change	Addition
NAME					6.2 NAME		1				. —
NTDEET ABBETTA					II.	T ADDRESS	.}				

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 applications with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

E. NICHOLAS DAVIS, III