PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90211 037 ***300.00

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1. Corporation	MEN I # P9800(NTERPRISES INC.	0018619							
Principal Place	of Business	Mailing Address			□ "				
5625 JOHNSON		5625 JOHNSON	ST.						
HOLLYWOOD F		HOLLYWOOD FL							
							E IN THIS SPACE		7
						corporated or Qualifed / 1998		· · · · · · · · · · · · · · · · · ·	
2. Principal Pl	ace of Business	2a. Mailing Add	' 0 5\$		4. FEI No	mber		Applied For	┙
21		26			65	-0845399		No Applicable	_
Suite, Apt.	#, etc.	Suite, Apt. #	, etc.		5. Certifo	ate of Status Desired	1 1	Additional	1
22		27			0, 00, 11,		Pee I	Se trited	4
City & State	•	City & State				n Campaign Financing		0 мау Вө- —	
23		28				und Contribution		d to Fees	┥
Zip	Country	Zip		ountry		rporation owes the curre		□No	
24	25	29	30			at Property Tax. and Address of New Re	Yes		-
	9. Name and Address of Curre	n: Registered Agent		81 Name	10. Name	and Address of New Re	idizianio vilani		┪
DUB	INSTEIN, MICHELL			OI Maine					╝
	JOHNSON ST.			82 Street Ad	dress (P.O. Bo	Number is Not Acceptat	ile)		ļ
1	LYWOOD FL 33021								-
HOL	LIMOOD FL 33021			83					
				84 City	-		F'L 85 Zip	Code	7
								to registered	4
SIGNATURE	to the provisions of Sactions 607.05 sgistered agent, or both, in the State in familiar with, and a scept the oblig					lirectors. I hereby accept	the ap xointment as	reçiistered	
	Signature, typed or printed is me of registered ag	n) DIRECTORS	(NO E Register	red Agent signature requi		NS/CHANGES TO OFF		O 35 IN 12	188
12.	PRESIDEN T			TITLE	ADDIT!	7,10, 0,0,0,0,0	Change		(11/98)
TITLE	MICHELL G. RUB			NAME					4
NAME	2632 JOHNSON	kr.		STREET ADDRESS					CR2E034
STREET ADDRUSS	HOLLYWOOD, FL.	33021		!					1 2
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NAME			B	NAME					
STREET ADDRUSS			6.3	STREET ADDRESS					1

6.4 CITY-ST-ZIP CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.0: (3)(i), Florida Statutes. I further certify that the ir formation 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 changes, or on an attachment with an address, with all other like empowered.

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	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE R OR DIRECTO	
7	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT	2
٠,	MICHELL G. RUBINSTEIN	

4-22-99

954) 981-1444

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