

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).

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Sep 13, 1999 8:00 am
Secretary of State

09-13-1999 90007 032 ***558.75

DOCUMENT # **P98000023116**

Corporation Name

MEAGAN'S PLACE, INC.



Principal Place of Business

**SOUTHWEST 105TH COURT
MIAMI FL 33165**

Mailing Address

**3711 SOUTHWEST 105TH COURT
MIAMI FL 33165**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/11/1998

Principal Place of Business

4238 SW 152nd Ave.

Suite, Apt. #, etc.

2a. Mailing Address

4238 SW 152nd Ave.

Suite, Apt. #, etc.

4. FEI Number

65-0818597

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

City & State

Miami FL

Zip

33185

Country

USA

City & State

Miami FL

Zip

33185

Country

USA

9. Name and Address of Current Registered Agent

AMERILAWYER

343 ALMERIA AVENUE

CORAL GABLES FL 33134

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

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

OFFICERS AND DIRECTORS

ET ADDRESS	PSD THOMPSON, SANDRA L 14311 LEANING PINE DRIVE MIAMI LAKES FL 33014	<input checked="" type="checkbox"/> DELETE
ET ADDRESS	VTD THOMPSON, PATRICIA L 14311 LEANING PINE DRIVE MIAMI LAKES FL 33014	<input type="checkbox"/> DELETE
ET ADDRESS		<input type="checkbox"/> DELETE
ET ADDRESS		<input type="checkbox"/> DELETE
ET ADDRESS		<input type="checkbox"/> DELETE
ET ADDRESS		<input type="checkbox"/> DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Sandra L. Sabo	
1.3 STREET ADDRESS	4238 SW 152 Ave	
1.4 CITY-ST-ZIP	miami FL 33185	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-4-99 305-222-1786

Date

Daytime Phone #

CR2E034 (5/99)