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

SIGNATURE:

MENAKER INVESTMENTS II, INC.



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Aug 24, 1999 8:00 am Secretary of State

08-24-1999 90006 033 ***188.75

8-16-99

<u>407 859-8489</u>

Principal Place	e of Business	Mailing Address			r rmanram jiğ iğiği törri düşir görr	r 4811 8611(B		48119 1181 188)
	VISTA DRIVE. #B1	POST OFFICE BOX 2216						
LAKE BUENA VISTA FL 32830 LAKE BUENA VISTA FL 32830					DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified			
					05/08/1998			
2. Principal P	ace of Business	2a. Mailing Address			4. FEI Number			Applied For
21 2815	DIRECTORS ROW	26	_[59-3511634	~		Not Applicable
Suite, Apt.		Suite, Apt. #, etc.	10		5. Certificate of Status Desired	\square	• -	5 Additional
	500 4		· J San	1E				Required
City & State		City & State	/		6. Election Campaign Financing			0 May Be ed to Fees
23 ORLAN	Country	28	Cour	ntry	8. This corporation owes the curre	ont waar	Adde	50 (0) e63
Zip 24 3280		29	30	iiu y	Intangible Personal Property.	encyean	Yes	☐ No
24 0 0 0	9. Name and Address of Curren		[30]		10. Name and Address of New R	egistered	Agent	
				81 Name			`	
MEN	AKER, MITCHELL G			B2 Street Add	trans (B.O. Boy Number is Not Accepts	ible)		
	E. BUENA VISTA DRIVE, #B1			82 Street Address (P.O. Box Number is Not Acceptable)				
LAKE	BUENA VISTA FL 32830		İ	83				
			-	84 City			85 Z	ip Code
				54 City		FL	. 03 -	
office or	registered agent, or both, in the State	of Florida. Such change wa	is authorized	t by the corporat	oration submits this statement for the pution's board of directors. I hereby acception	t the appoi	ntment as	registered
agent. I a	am familiar with, and accept the obliga	and its or, occasion do nood of,						
agent. I a	Signature, typed or printed name of registered ager	nt and title if applicable.	(NOTE: Register		quired when reinstating)	DATE		TODO 11/40
agent. I a SIGNATURE	Signature, typed or printed name of registered ager OFFICERS AN	nt and title if applicable.	(NOTE: Register	red Agent signature red	quired when reinstating) ADDITIONS/CHANGES TO OFF	FICERS AN		
agent. I a SIGNATURE 12. TITLE	Signature, typed or printed name of registered ager OFFICERS AN	nt and title if applicable.	(NOTE: Register 13.	red Agent signature red		FICERS AN	ID DIREC	
agent. I a SIGNATURE 12. TITLE NAME	Signature, typed or printed name of registered ager OFFICERS AN D MENAKER, MITCHELL G	nt and title if applicable. ID DIRECTORS DELETE	(NOTE: Register 13. 1.1 TIT	red Agent signature red	ADDITIONS/CHANGES TO OFF	FICERS AN	X Chang	e Addition
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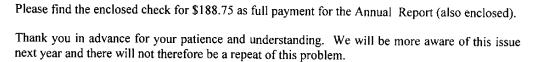












We have just received your "2nd and Final Notice for filing our "Profit Corporation Annual Report 1999" This document is the very first notice received regarding the filing requirement.

Yours truly

Doc. # M98000043102 FEI # 59-3511634

P9800004310Z 609066-90000-33

Margaret Bream Margaret Brian Office Manager

Ft. Lauderdale

Orlando

Corporate Office

2815 Directors Row

Suite 500

Orlando, FL 32809

tel 407.859.8489

fax 407.859.9015

August 16, 1999

Florida Department of State

RE: Menaker Investments II, Inc.

Division of Corporations Registration Section P. O. Box 6327 Tallahassee, FL 32314

Miami

Minneapolis

