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

PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

Apr 29 1997 8:00am Secretary of State

3. Date Incorporated or Qualified

FILED

3a. Date of Last Report

Applied For

DOCUMENT #

2. Principal Place of Business

ition Namio 194 Rolen 2 in 114. 314218

Principal Pace	of Business		

Mailing Address

2a. Mailing Address

2875 NE 1910+ Street, PhIR North Minomi Benil, Flo 33160

21	26		Not Applicable		
Suite, Apt	<u>├-</u>		5. Certificate of Status Desired 38.75 Additional		
City & Srat	Pare City & State		Fee Required		
23	28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
l 2100	Country Zip	Country	This corporation has liability for intangible tax under s. 199.032,		
24	25 29 3	0	Florida Statutes		
	Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent		
81 Name					
į ,	MAKE M. MINGON	82 Street	Address (P.O. Box Number is Not Acceptable)		
MARK M. MAYUS 2875 NE 191 ot, PHIA North MIRMI BERIL, Fl		<u></u>			
/	Voith Miami Beril, Fl	83			
	33160	84 City	FL 85 Zip Code		
44 Ct 21 (20)		the above named	corporation submits this statement for the purpose of changing its registered		
office or r	egistered agent, or both, in the State of Florida. Such change was aut	thorized by the corp	corporation's board of directors. I hereby accept the appointment as registered		
· "	m larnil ar with, and accept the obligations of, Section 607.0505, Florid		104.05 4/20/17		
SIGNATURE		C/C M. M. Progressered Agent a gnature	TO THE STATE OF TH		
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TIFLE	PRES. DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition		
MAM.	MARK M. MAYERS	1.2 NAME			
STREET ADERESS	2875 NE 1912+ St. PHIA North Minny Bence, Fl 33140	13 STREET ADDRESS			
005-87-78	North MINN BENLL, FI 33160	1.4 CITY - ST - ZIP			
1111	DELETE	2.1 TITKE	Change Addition C		
HAME		22 NAME			
51HEET A IDRESS		2.3 STREET ADDRESS			
GIY ST Zer Tidak	DELETE	2. 4 CDY - ST - ZIP 3.1 TITLE	Change Addition		
NAM:		3.2 NAME	Country Country		
SIECLI ACTRICAS	l.	3.3 STREET ADDRESS			
CHY St 74		3.4 CITY-ST-ZIP			
Little of Ar	DELETE	4.1 TITLE	Change Addition		
NAME		4. 2 NAME			
STREET ADDRESS.		4.3 STREET ADDRESS			
002 7.7		4.4 CITY - ST - ZIP			
TIECH	□ DELETE	5 1 TITLE	Change Addition		
IsAV:		52 NAME	40 // no /0011		
STEELS ADDOCTOR		5 3 STREET ADDRESS	-N1467177		
OHY 51 70		5 4 CHTY+ST+ZIP	/ <u>/</u> //		
1101	[] DELETE	6.1 THLE	Change Addition		
1500.4		6 2 NAME	000002162000 -05/01/9701037040		
SIREH ADDRESS		6.3 STREET ADDRESS	-05/01/9/0103/040		
C 1Y S1 - 20F		6 4 CITY - ST - ZIP	***165.00		

14. Too bereby useffy that the information supplied with this liting 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 are inclined an defector of the corporal on 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:

MARYUN

SIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARK M. MAYERS

4/20/17

1-800-331-1021

Daytime Phone #