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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(7)

MYDI, INC.

FILED

Apr 27 1998 8:00am

Secretary of State

Principal Place of Business Mailing Address						188 ISIDI IBIN BIBII BIB	II OHOIL BIBII OIDII	THE FLORE
12011-1 S. CLEVELAND AVE. FT. MYERS FL 33907		12011-1 S. CLEVELAND AVE. FT. MYERS FL 33907		DO NO	OT WRITE IN THIS	SPACE		
					3. Date Incorporated or C	ualified		
					02/06/1991			
2. Principal Place of Business		2a. Mailing Address			1		plied For	
21		26			65-0244231			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status De	sired	\$8.75	
22		27			0, 00mm02,0 or orange		Fee Re	
City & State		City & State		Election Campaign Final		\$5.00		
23		28		Trust Fund Contribution Added to Fees				
Zip Country		Zip Country		ry	8. This corporation owes or has paid the current year Intangible			
24	25	29	30		Personal Property Tax			J No
	9. Name and Address of Curre	nt Registered Agent		1 Name	10. Name and Address of		1 Agent	
STANDISH, DIANA				'I Name D	DIANA I. CTANDISH			
1779-18 RED CEDAR DRIVE			ļ e	2 Street Addre	ess (P.O. Box Number is Not.	Acceptable)		
FT. MYERS FL 33907			L		11-1 S. CLEVA	AND AVC		
			8	3				
			8	4 City			85 Zip (Code
				1	Myers	FI	┗ │	907
11. Pursuant to	o the provisions of Sections 607.05	02 and 607.1508, Florida Statu	utes, the abo	ve-named corp	oration submits this statement ion's heard of directors. There	for the purpose by accept the ar	of changing its	s registered registered
agent. I an	ogistered agent or both, in the Stat n familiar with, and accept the other	gations of Section 607.0505, F	lorida Statut	es.	ion a board of girodiors. There	o, docop, and ap		r og istorou
SIGNATURE	Many	Jimush S	ND			4-22.	48	
				gent signature require	<u></u>	DATE		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES	O OFFICERS AN	ND DIRECTOR Change	RS IN 12
TITLE	PD ATTION	L DELETE	1.1 TITLI				Change	TT MODITION
NAME	STANDISH, J. PATRICIA		1.2 NAM					
STREET ADDRESS			1.3 STRE	ET ADDRESS				
CITY-ST-ZIP	MENDOTA HEIGHTS MN 55118		1.4 City				1 05	I A suppose
TITLE	\$TD	☐ DELETE	: 2.1 TITLI				Change	Addition
NAME	AVERY, DIANA		2.2 NAM					ļ
STREET ADDRESS	1779-18 RED CEDAR DR.		2.3 STRE	ET ADDRESS				
CITY-ST-ZIP				-SI-ZIP		 		
TITLE		[] DELETE	3.1 TITLI				Change	Addition .
NAME			3.2 NAM	E				
STREET ADDRESS			3.3 STRE	et address				
CITY-ST-ZIP			3.4. C(T)	'-ST-ZIP				
TITLE		[_] DELETE	4.1 TITU				Change	Addition
NAME			4. 2 NAN	IE				
STREET ADDRESS			4.3 STRE	et address		•		
CITY-ST-ZIP			4.4 CITY	- ST - ZIP				
TITLE		☐ DELETE	5.1 TITLE	•			Change	Addition
NAME	*		5.2 NAM	E .				
STREET ADDRESS			5.3 STRE	ET ADDRESS				
CITY-ST-ZIP			5.4 CITY	- ST - 7IP				
TITLE		☐ DELETE	6.1 TITU				Change	Addition
NAME			5.2 NAM	E				
STREET ADDRESS			6.3 STRE	ET ADDRESS				
CITY-ST-ZIP			6.4 CITY	-ST-ZIP				

14. Thereby 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 prantied. In on an attachment with a yaddress.

4-23-93

941-936-166