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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S40919 1. Corporation Name

THE MANN GROUP, INC.

Principal Place of Business Mailing Address					T (BENILDED IN DENNE DOESD INNUL II	IBIB IBII BIBII BIBII BIBII BIBI	III W i Wii Wiwii i Wwi
		3706 N OCEAN BLVD					
SUITE 420 FT. LAUDERDALE FL 33308		Suite 420 Ft. Lauderdale FL 33308		DO NOT WRITE IN THIS SPACE			
US	LE PL 33300	US			3. Date Incorporated or Qualifed	12 11 1110 01 7102	
					03/25/1991		.]
2. Principal P	lace of Business	2a. Mailing Address		*	4. FEI Number		Applied For
21		26			65-0252498	\	Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.			5. Certifcate of Status Desired	Y	Additional Required
City & Stat	io ·	City & State			a. Electica Compaign Financia		
23	ic	28			6. Election Campaign Financing Trust Fund Contribution		O May Be
Zip	Country	Zip	Country	,	8. This corporation owes the curr	rent year Intangible	
24	25	 	30		Personal Property Tax.	Yes	□No
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New F	Registered Agent	
IACTE	TONIATIONIAL EVECUTIVE CONC	I II TANTO INO	81	Name			
	RNATIONAL EXECUTIVE CONS NOCEAN BLVD	OLIANIS INC	82	Street Addr	ress (P.O. Box Number is Not Accepta	able)	
	TE 420		83		en e		17. 12.
	AUDERDALE FL 33308					國 研究 海绵点的	图 第 第
			84	City	75 6 7 7 7 7 W W	FI 85 Zi	p Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statutes	s, the above	ı e-named corp	poration submits this statement for the	purpose of changing	its registered
office or a	egistered agent, or both, in the State of samiliar with, and accept the oblig	e of Florida, Such change was au ations of, Section 607,0505, Flori	thorized by da Statutes	the corporation	on's board of directors. I hereby accep	pt the appointment as	registered
SIGNATURE		,				•	
					,		
	Signature, typed or printed name of registered ag			nt signature require	ad when reinstating)		
12.	OFFICERS A	ND DIRECTORS	13.	nt signature require	ADDITIONS/CHANGES TO OF	FICERS AND DIREC	
TITLE	OFFICERS A		13. 1.1 TITLE	nt signatura require		*****	
TITLE NAME	OFFICERS A D MANN, MICHELLE	ND DIRECTORS	13. 1.1 TITLE 1.2 NAME		ADDITIONS/CHANGES TO OF	FICERS AND DIREC	
TITLE NAME STREET ADDRESS	OFFICERS A D MANN, MICHELLE 3706 N OCEAN BLVD #420	ND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREE	TADDRESS	ADDITIONS/CHANGES TO OF	FICERS AND DIREC	
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TITLE NAME STREET ADDRESS	OFFICERS A D MANN, MICHELLE 3706 N OCEAN BLVD #420 FT. LAUDERDALE FL PD	ND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREE* 1.4 CITY-S	TADDRESS	ADDITIONS/CHANGES TO OF	FICERS AND DIREC Chang	e Addition
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14. 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

FILED

Feb 18, 1999 8:00am

Secretary of State

02-18-1999 90044 023 ***158.75