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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Mar 05, 1999 8:00 am Secretary of State

03-05-1999 90092 005 \*\*\*158.75

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # S92551 1. Corporation Name

MLN INVESTMENT CORPORATION

***************************************		•							
Principal Place	of Business	Mailing Address				-	<b>                                    </b>	Tri Bidii (80)	
6466 NW 5TH WAY 6466 NW 5TH WAY									
FT. LAUDERDAL			FT. LAUDERDALE FL 33309						
US US						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed 11/07/1991			
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	Ĭ Δnr	olied For	
	ace of Business		Mailing Address			65-0300097	<del>                                     </del>	Applicable	
21   Suite, Apt. #	# etc	Suite, Apt. #, etc.				\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	8.75 A		
22 Suite, Apr. 7	+, GlG.	27				5. Certificate of Status Desired	Fee Rec		
City & State	)	City & State				6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution	Added to	Fees	
Zip	Country	Zip	<u> </u>			8. This corporation owes the current year Intangi		_	
24	25	25 29 30				1 Ciscilar Fieberty Fax:	·	□No	
	9. Name and Address of Curr	ent Registered Agent		04		10. Name and Address of New Registered Age	nt		
DACC	SARIELLO, JOHN			81	Name	·			
	NW 5TH WAY		8		Street Addre	ess (P.O. Box Number is Not Acceptable)			
	AUDERDALE FL 33309		83		- "				
11. 6	AODENDALE I E GOGGO			63					
				84	City	FL <sup>8</sup>	5 Zip C	ode	
	007.0	500 - 1 COZ 4500 Florido Clab	too the o	D 01/2	named come	eration submits this statement for the purpose of cha	nging its	registered -	
11. 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 a	cent and title if applicable. (NOT	E: Registered	Agent	signature required	when reinstating) DATE			
12.		AND DIRECTORS	13.		,	ADDITIONS/CHANGES TO OFFICERS AND D	IRECTO	RS IN 12	
TITLE	D	☐ DELETÉ 1.11		πE			Change	☐ Addition	
NAME	NUDELMAN, JEFF		1.2 N	AME					
STREET ADDRESS	<u> </u>		1.3 ST	1.3 STREET ADDRESS			-		
CITY-ST-ZIP	, , , , , , , , , , , , , , , , , , , ,		14 CI	14 CITY-ST-ZIP					
TITLE	D	☐ DELETE	ELETE 2.1 TITI				] Change	☐ Addition	
NAME	OAITH, LINDA		2.2 N/	AME					
STREET ADDRESS	6434 NW 5TH WAY		2.3 ST	2.3 STREET ADDRESS					
-CITY-ST-ZIP	-FT-LAUDERDALE-FL			HY-ST	- ZIP		105	- Addition	
TITLE		☐ DELETE 3.1		TLE		٠,	] Change	☐ Addition	
NAME			32 N						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP		C DELETE		TY-ST	T-ZIP		Change	Addition	
TITLE		☐ DELETE	4.1 Ti				, 5,.c.igo		
NAME			4. 2 N		********			1	
STREET ADDRESS					ADDRESS			ļ	
CITY-ST-ZIP		☐ DELETE	4.4 CI 5.1 TI	TY-ST	- LIP		] Change	Addition	
TITLE			5.1 N			_	•	_	
NAME STREET ADDRESS			5.3 <b>S</b>	TREET	ADDRESS			- 1	
			5.4 C	ITY-ST	-ZIP				
CITY-ST-ZIP TITLE				6.1 TITLE			] Change	Addition	
NAME			6.2 N	AME				]	
STREET ADDRESS			6.3 S	TREET.	ADDRESS				
CITY ST. ZIP				TY-ST					
44 15	certify that the information supplied	with this filing does not qualify t	for the exe	mptic	on stated in S	Section 119.07(3)(i), Florida Statutes. I further certify	that the in	nformation	
						shall have the same legal effect as if made under or red by Chapter 607, Florida Statutes; and that my n			