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CORPORATION ANNUAL REPORT 1995



FLORIDA DEPARTMENT OF STATE Sergio B. Mortman Secretary of State DIVISION OF CORPORATIONS

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # V28057 (0)

1. Corporation Name MSTCO, INC.

Principal Place of Business: 30855 NE 16TH AVE C-102 NORTH MIAMI BCH FL 33179 US; Mailing Address: PO BOX 69854 MIAMI FL 33269 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 04/13/1992; 3a. Date of Last Report: 04/22/1994

4. FEI Number: 65-0325589; Applied For: Not Applicable

5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

6. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: Yes

2. Principal Place of Business: 21 20855 NE 16th Ave; Suite, Apt. #, etc.: 22 Suite C-1; City & State: 23 No Miami BCH FL; Zip: 24 33179; Country: 25 USA

9. Name and Address of Current Registered Agent: SHAPIRO, IRA R 13980 BISCAYNE BLVD SUITE 400 MIAMI FL 33181

10. Name and Address of New Registered Agent: 81 Name; 82 Street Address; 83; 84 City; 85 Zip Code

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 agent and title if applicable; DATE

12. OFFICERS AND DIRECTORS: 1.1 TITLE: D; 1.2 NAME: FREIDES, STUART S; 1.3 STREET ADDRESS: 20011 NE 6TH COURT CIR; 1.4 CITY-ST-ZIP: NORTH MIAMI BCH FL; 2.1 TITLE: D; 2.2 NAME: HOUGHTALIN, MICHAEL R; 2.3 STREET ADDRESS: 20011 NE 6TH COURT CIR; 2.4 CITY-ST-ZIP: NORTH MIAMI BCH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12: 1.1 TITLE: Change; 1.2 NAME: 19401 NE 22 AVE; 1.3 STREET ADDRESS: MIAMI FL 33180; 2.1 TITLE: Change; 2.2 NAME: 19401 NE 22 AVE; 2.3 STREET ADDRESS: MIAMI FL 33180; 3.1 TITLE: Change; 3.2 NAME: Change; 3.3 STREET ADDRESS: Change; 3.4 CITY-ST-ZIP: Change; 4.1 TITLE: Change; 4.2 NAME: Change; 4.3 STREET ADDRESS: Change; 4.4 CITY-ST-ZIP: Change; 5.1 TITLE: Change; 5.2 NAME: Change; 5.3 STREET ADDRESS: Change; 5.4 CITY-ST-ZIP: Change; 6.1 TITLE: Change; 6.2 NAME: Change; 6.3 STREET ADDRESS: Change; 6.4 CITY-ST-ZIP: Change

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(h), 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 amendment with an address.

SIGNATURE: STUART FREIDES; Date: 4-18-95; System Filing # 305-653-2003