

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/8/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 20 AM 9:55

DOCUMENT # V28954 (8)

1. Corporation Name

MIDMARK MANAGEMENT GROUP, INC.

Principal Place of Business

3520 SW 104 AVE
MIAMI FL 33165
US

Mailing Address

3520 SW 104 AVE
MIAMI FL 33165
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/16/1992

3a. Date of Last Report

05/01/1994

4. FEI Number

65-0325803

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 6800 S.W. 40th St

Suite, Apt. #, etc

22 Suite 327

City & State

23 Miami, FL

Zip

24 33155

Country

25 US

2a. Mailing Address

26 6800 S.W. 40th St

Suite, Apt. #, etc

27 Suite 327

City & State

28 Miami, FL

Zip

29 33155

Country

30 US

9. Name and Address of Current Registered Agent

SNEATH, LEWIS 83
8315 SW 24TH STREET
3520 SW 104 AVE
MIAMI FL 33165

10. Name and Address of New Registered Agent

81 Name LEWIS E. SNEATH
82 Street Address (P.O. Box Number is Not Acceptable)
6800 S.W. 40th St.
83 Suite 327
84 City Miami FL 85 Zip Code 33155

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

LEWIS SNEATH Lewis Sneath

6-15-95

Signature (Typed or printed name of registered agent next to it if applicable)

NOTE: Registered Agent signature required when certificate is

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP
D	SNEATH, LEWIS	3520 SW 104 AVE	MIAMI FL
ST	SNEATH, CLARA	3520 SW 104 AVE	MIAMI FL

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY, ST, ZIP
X Change ☐ Addition	Sneath, LEWIS	6800 S.W. 40th St - Suite 327	Miami, FL 33155
X Change ☐ Addition	Sneath, CLARA	6800 S.W. 40th St. Suite 327	Miami, FL 33155
☐ Change ☐ Addition			
☐ Change ☐ Addition			
☐ Change ☐ Addition			
☐ Change ☐ Addition			
☐ Change ☐ Addition			
☐ Change ☐ Addition			

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)(k), Florida Statutes. I further certify that the information contained 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.

SIGNATURE:

LEWIS SNEATH Lewis Sneath

6-15-95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature (Typed or printed name of registered agent next to it if applicable)