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Jan 14 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 695564 (5)
1. Corporation Name
MGM GRAND HOTEL & CASINO, INC.



Principal Place of Business Mailing Address
6120 DUCKWEED RD 6120 DUCKWEED RD.
LAKE WORTH FL 33467-5808 LAKE WORTH FL 33467-5808
US

3. Date Incorporated or Qualified 07/22/1981
3a. Date of Last Report 04/12/1996

2. Principal Place of Business 2a. Mailing Address
21 6120 DUCKWEED PR 26 SAME
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 City & State 27 City & State
23 LAKE WORTH FLA
Zip 24 33467 25 USA 29 33467 30 USA
Country Country

4. FEI Number 65-0132532 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
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JOHN PEROTTI
6120 DUCKWEED RD
SUITE B
LAKE WORTH FL 33467

81 Name NONE
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 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 John Perotti DATE 1-6-97
Signature, typed or printed name of registered agent and title (Applicable) (NOTE: Registered Agent signature required when reinstating)

Table with 2 main columns: 12. OFFICERS AND DIRECTORS and 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Each row contains fields for Title, Name, Street Address, and City-ST-ZIP, with checkboxes for 'DELETE', 'Change', and 'Addition'.

14. I do 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.

SIGNATURE: John Perotti DATE 1-4-97 1-407-790-2051
Signature and typed or printed name of signing officer or director Daytime Phone #

CR2E034 (9/96)