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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995



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

DOCUMENT # P94000069095

1. Corporation Name

LMG INTERNATIONAL, INC

Principal Place of Business Mailing Address

11423 KIDD LANE
PALM BEACH GARDENS, FL 33410

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 9.13.95
36. Date of Last Report

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21 11423 KIDD LANE	26 11423 KIDD LANE	45-0514404	Not Applicable
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
23 PALM BEACH GARDENS, FL	27 PALM BEACH GARDENS, FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24 33410	25 U.S.A.	29 33410	30 U.S.A.
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	

9. Name and Address of Current Registered Agent

MICHELE GUY
11423 KIDD LANE
PALM BEACH GARDENS, FL 33410

10. Name and Address of New Registered Agent

81 Name
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 *[Signature]* MICHELE GUY PRESIDENT 3.1.95
(Signature, title and print name of registered agent and fee if applicable) (NOTE: Registered Agent signature required when reappointing) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRESIDENT	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MICHELE GUY	12 NAME	
STREET ADDRESS	11423 KIDD LANE	13 STREET ADDRESS	600001426106
CITY-STATE-ZIP	PALM BEACH GARDENS, FL 33410	14 CITY-STATE-ZIP	-03/10/95--01040--003
TITLE	VICE PRESIDENT	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RICHARD W. GUY	22 NAME	****200.00 ****200.00
STREET ADDRESS	12A EMERSON CT. 14 CLYDEDALE	23 STREET ADDRESS	
CITY-STATE-ZIP	KINGSTON, O, JAMAILA	24 CITY-STATE-ZIP	
TITLE	TREASURER	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	THOMAS J. COFFMAN	32 NAME	
STREET ADDRESS	841 SIXTH AVENUE, SUITE 203	33 STREET ADDRESS	
CITY-STATE-ZIP	SAN DIEGO, CA 92101	34 CITY-STATE-ZIP	
TITLE	SECRETARY	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MICHELE GUY	42 NAME	
STREET ADDRESS	11423 KIDD LANE	43 STREET ADDRESS	
CITY-STATE-ZIP	PALM BEACH GARDENS, FL 33410	44 CITY-STATE-ZIP	
TITLE		51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-STATE-ZIP		54 CITY-STATE-ZIP	
TITLE		61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-STATE-ZIP		64 CITY-STATE-ZIP	

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 199.01(4)(b), 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: *[Signature]* MICHELE GUY 3.1.95 407-624-7593
(Signature and print name of signing officer or director) DATE