	PLEASE REA	D ALL INS	TRUCTIONS BEFORE	MPLETING THIS FORM.	
• -	PLICATION FOR ISTATEMENT		DA DEPARTMENT OF STATE  Sandra B. Mortham  Secretal State  Division of Confidentials	FILED	
OCUMENT # p 9 500000 5720				98 JAN 21 AM 8:51	
T. Corpor	1iv) Name	·	SECRETARY OF STATE TALLAHASSEE, FLORIDA		
M.	HG SYSTEMS,	INC	•	TALLAHASSEE. FLORIDA	
	lace of Business ST. PETETLS BURG E 5		ress PO. BOX 17914 EARWATER, FL		
	MAR, FL 3467	7	34622	96-97	
	addresses are incorrect in any way, line				
			ling Office Address, If Applicable	Date Incorporated or Qualified     To Do Business in Florida     1/1/95	
Suite, Apt. #, etc.  Suite, Apt. #  City & State  City & State			<u> </u>	5. FEI Number Applied For	
Zip Zip	Country	Zip	Country	57-33/2569 Not Applicable  6. \$8.75 Additional Fee required	
				CERTIFICATE OF STATUS DESIRED for a Certificate of Status	
	and Street Addresses of Each Officer a	nd/or Director (FI	Street Address of Ea	ach	
Title(s) and/or Dire			Officer and/or Direct 3 (Do NOT Use Post Office Bo	ox Numbers) 4	
PRES MICHAEL GAINSBURG PALM MARROR, FL 346					
			8000024079982 -01/22/9801007008 *****515.00 *****515.00		
	8. Name and Address of Curre	ni Ragistared An	ent	Name and Address of New Registered Agent	
James P. Hines Hines & Associates P.A. Hyde Park Professional Center 315 South Hyde Park Ave.  Tampa, FL 33606  10. 1, being-appointed the registered agent of the above named exporation, am familiar with and accept the foligations of Section 607.0505, F.S.					
Signature of Registered		\.\x	oration, am familiar with and accept the	Date 1/16/98	
11. <b>D</b> o	es this corporation pay pt. of Revenue under S	any intang 3. 199.032,	gible tax to the Florida Statutes. Yes	No (See other side for information on intangible tax.)	
owed by	sialement application, the reason for his	ssolution has beer e names of individ	eliminated, the corporate name satisfie luals listed on this form do not qualify (c ve the same legal effect as if made und		
SIGNAT	URE: AUSAM SIGNATURE AND TYPED OR F	MMM PRINTED NAME OF	MICHAEL SIGNING OFFICER OR DIRECTOR	6HNSBUR6 11/7/97  Date Daytime Phone #  (813) 781-6381	
				(815)781-6381	

Robert E. Krusoe, C.P.A. Barbara J. Reynolds, E.A.

2002 N. Lois Avenue, Suite 160 Tampa, Florida 33607 Office (813) 877-8500 Fax (813) 877-2754

January 6, 1998

Florida Department of State Division of Corporations Andy Dunlap P.O. Box 6327 Tallahassee, FL 32314

Re: MAG Systems, Inc.

59-3312569

Ref #: P95000005720 Dissolution of Corporation

Dear Mr. Dunlap:

Enclosed is a copy of your above referenced notice to the taxpayer, Mag Systems, Inc.

Also enclosed is the Application for Reinstatement and a check in the amount of \$515.00. As discussed Mr. Gainsburg was unaware that he was to file an annual report due to a change in his business address therefore not receiving his notices. The fees stated by your office were as follows: \$200.00 reinstatement fee, \$165.00 filing fees, and \$150.00 1998's annual report fee.

If additional information is needed please advise. I can be reached at the address, telephone or fax number on this letter Monday through Friday from 9:00AM until 6:00PM.

Respectfully,

Barbara J. Reynolds, E.A.