

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Feb 19 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P95000060166 (2)

1. Corporation Name  
MGA SYSTEMS INTERNATIONAL, INC.



Principal Place of Business

12390 BRIGATON BAY TRAIL S  
JACKSONVILLE FL 32246  
US

Mailing Address

12390 BRIGATON BAY TRAIL S  
JACKSONVILLE FL 32246  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/03/1995

4. FEI Number

59-3414444

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 owes or has paid the current year intangible  
Personal Property Tax due June 30.



Yes



No

2. Principal Place of Business

21 9951 Atlantic Blvd Ste 118

Suite, Apt. #, etc.

22 Suite 118

23 Jacksonville FL

24 32225

25 DUVAR

2a. Mailing Address

26 9951 Atlantic Blvd Ste 118

Suite, Apt. #, etc.

27 Suite 118

28 Jacksonville FL

29 32225

30 DUVAR

9. Name and Address of Current Registered Agent

ASSADOGLI, MARY GRACE  
9951 ATLANTIC BLVD, SUITE 107  
JACKSONVILLE FL 32225

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

MARY ASSADOGLI

(NOTE: Registered Agent signature required when reinstating)

DATE

2-17-98

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PD  
ASSADOGLI, MARY GRACE  
STREET ADDRESS 12390 BRIGHTON BAY TRAIL S  
CITY-ST-ZIP JACKSONVILLE FL 32246

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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: MARY GRACE ASSADOGLI

2-17-98 1900230-6170

CP2E034 (10/97)