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

**PROFIT CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DC 1. Co

(2)

**FILED** Jan 17 1997 8:00am Secretary of State

M. G. REALTY CORP.

Principal Place of Business Mailing Address  146 E FLAGLER ST 146 E FLAGLER ST							ABIS BIBNI BIBNI B	(BII BIBIF I	1f811 (88)
MIAMI FL 3313		MIAMI FL 33131-1130							
						3. Date Incorporated or Qualified 04/17/1978	3a. Date o 03/20/		eport
2. Principal P	lace of Business	2a. Mailing Address 26				4. FEI Number 59-1933927			plied For of Applicable
Suite, Apt.	#, etc	Suite Apt. #. etc.				5. Certificate of Status Desired	□ \$	8.75 / Fee Re	Additional equired
City & Star		City & Stale	AND THE PERSON NAMED IN COLUMN TWO			Election Campaign Financing     Trust Fund Contribution		\$5.00 Added t	May Be to Fees
7ip <b>24</b>	Country 25	Z <sub>(D</sub>	30	intry		8. This corporation has liability for in Florida Statutes	ntangible tax		, 199.032,
	g. Name and Address of Curre	and a second sec				10. Name and Address of New Reg	istered Age	nt	
	er, max r.			81	Name				
	S.E. 2 AVE. #1326 /II FL 33131			82	Street Add	ress (P.O. Box Number is Not Acceptab	e)	<del></del>	***************************************
				83			-2		
	and the second of the second o			84	City		FL 8	<u> </u>	Code
office or r	to the provisions of Sections 607 03 egistered agent, or both, in the Star m familiar with, and accept the obli	te of Florida. Such change wa	s authorize	d by	the corpora	poration submits this statement for the pi tion's board of directors. I hereby accep	urpose of cha t the appoint	inging it ment as	s registered registered
SIGNATURE	Sai zok (gear) pasaras er trojstie) a	gertand blie 1 apposable (N	O <sup>*</sup> E Fegistere	d Age	ent signature requ	ired when reinstating)	DATE		<u></u>
12.	PD OFFICERS A	ND DIRECTORS	13.		··· · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFIC			
TIT_E	KOZOLCHYK, BENNY	DELETE	1 1 T	TLE				Change	Addition
NAME	2076 N.E. 121 RD.		12 N						
STREET ADDRESS	N. MIAMI FL				ADDRESS				
0174-\$1-718	SD SD	Lociere			T-ZIP		· · ·	0	- Daniel
THILE .	GURMAN, MARK	DELETE	2 1 Ti				لـا	Change	☐ Add:tion
NAME	7300 WAYNE AVE.		22 N						
STHEET ADDRESS	MIAMI BEACH FL				ADDRESS				
CITY-ST-7'F'		DELETE	31 TI		ST- ZIP			Change	Addition
NAME		hand weeking	32 N					igu	- , , , , , , , , , , , , , , , , , , ,
STREET ADDRESS			- 1		ADDRESS				
Chr. 21-75					ST-ZIP				
TITLE		DELETE	4 1 Ti		77	*****		Change	Addition
NAME		<del></del>	4 2 h	IAME				•	_
STREET ADDRESS			•		ADDRESS				
COTY-ST ZP					T - ZIP				
TITLE		DELETE	51 TI					Change	Addition
NAME			5 2 N	3MA					
STREET ADDRESS			5.3 \$	IREET	ADDRESS				
OFY-\$1-769					T - ZIP				
TITLE		DELETE	61 TI					Change	Addition
NAME			6.2 N	AM:				•	
STREET ADDRESS			635	TREET	ADDRESS				
CITY ST-78					T-ZIP				
	The second secon					1: 0 :: 140 0 T(0) (1) E1 11 E1	***************************************		

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information increated on this armual report or suppliemental angular 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 of truttee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DUTCH OFFI