[9700006377

FILING COVER SHEET

REFERENCE:	0173.1099
DATE:	12-3-97
CONTACT:	CINDY HICKS 9 W. G.
FROM:	CORPORATE & CRIMINAL RESEARCH SERVICES S
	103 N. MERIDIAN STREET
	TALLAHASSEE, FL 32301
TELEPHONE:	222-1173
SUBJECT:	Maga Agency Group, Inc 12/
STATE FEES PREPAID	2000023622424 -12/03/9701072010 ****122.50 ****122.50
() ARTICLES OF INC.	() AMENDMENT () DISSOLUTION () ANNUAL REPORT
(V) QUALIFICATION	() LIMITED PARTNERSHIP () ANNUAL REPORT
() FICTITIOUS NAME	() LIMITED LIABILITY () REINSTATEMENT
() UCC-1	() UCC-3
PROVIDE US WITH:	:
CERTIFIED COPY	() CERTIFICATE OF STATUS () STAMPED COPY
, , , , , , , , , , , , , , , , , , , ,	

Examiner's Initials

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	Mega Agency Group, Inc.				-		
	(Name of corporation: must include the word "INCORPOR abbreviations of like import in language as will clearly indiceperson or partnership if not so contained in the name at pre-	RATED", "Cate that it is sent.)	COMPANY", "COF s a corporation inst	PORATION ead of a natur	" or won	ds or	
^	Delaware	3	33-073	-1609			
2.	State or country under the law of which it is incorporated)	J	(FEI nun	ber, if applica	able)		
4.	9/18/96	5	. بــــــــــــــــــــــــــــــــــــ	Perpetual	<u>.</u>		
••	9/18/96 (Date of incorporation)	(Duratio	on: Year corp. will	cease to exist	or "perp	etua!")	Ald
6.	12/01/97	٠.				2	5
	(Date first transacted business in Florida. (SEE SECTION	s 607.1501	,607.1502, AND 8	17.155, F.S.)		-3	low or consonation
7.	4100 Newport Place, Suite 790				,		
	Newport Beach, CA 92660	-					27.7
	(Current maili	ng address)				Ui	_ <u>`</u>
8	Life Insurance Agency						
1	(Purpose(s) of corporation authorized in home state or count Florida)						
9.	Name and street address of Florida registered acceptable)	agent: ((P.O. Box or M	ail Drop B	ox <u>NO</u>	Ţ	
	Name: NRAI Services, Inc.	<u>",</u>			-		
Ο£	fice Address: 526 E. Park Avenue	· · · · · · · · · · · · · · · · · · ·		-	·		
	Tallahassee, FL	. F	-32301 lorida				
10.	Registered agent's acceptance:	,	Žip Code	:)	• -		
cor reg all	ving been named as registered agent and to acce poration at the place designated in this applicati istered agent and agree to act in this capacity. I statutes relative to the proper and complete perf I accept the obligations of my position as registe	ion, I here I further d Tormance	eby accept the a agree to comply of my duties, a	appointmen with the p	nt as rovisio	ns of ith	
	(Registered ager	2 nt's signatur	Praide, G			-	

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors: (Street address ONLY-P. O. Box NOT acceptable)

A. DIRECTORS (Street address only-P.O. Box NOT acceptable)

Chairman:	Wayne Creasy	 -
Address:	3225 So. Norwood Street, #110, Tulsa, OK 74135	
_	Edgar D. Allen	
Address:	4100 Newport Place, Suite 790	· · · · · · · · · · · · · · · · · · ·
	Newport Beach, CA 92660	
Director:	Mark Burke	<u></u>
Address:	4100 Newport Place, Suite 790	97 0
	Newport Beach, CA 92660	DEC.
Director:		ယ်
Address:		35
		<u> 왕</u>
B. OFFICERS	(Street address only- P. O. Box NOT acceptable)	CT.
	Edgar D. Allen	
	4100 Newport Place, Suite 790	
Addi (533	Newport Beach, CA 92660	
Vice President:		
	Lucinda Herdman 4100 Newport Place, Suite 790	
Address.	**	<u></u>
	Newport Beach, CA 92660	
	James L. Kelly	
Address:	4100 Newport Place, Suite 790	
	Newport Beach, CA 92660	
Treasurer:	Mark Burke	
Address:	4100 Newport Place, Suite 790	
	Newport Beach, CA 92660	
NOTE: If neces officers and/or d	ssary, you may attach an addendum to the application listing additional lirectors.	
13	-	
(Signatu	ire of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	
14	Edgar D. Allen, President	
	(Typed or printed name and capacity of person signing application)	

State of Delaware

Office of the Secretary of State

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I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "MEGA AGENCY GROUP, INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN

GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE

RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTIETH DAY OF OCTOBER,

A.D. 1997.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HA

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

SCAL TAKES OF STATE O

dward J. Freel, Secretary of State

AUTHENTICATION: ___

8731328

DATE:

10-30-97