

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J79892

1. Entity Name

M.G.M. ILLUSTRATION & DESIGN, INC.

FILED
May 02, 2000 8:00 am
Secretary of State

05-02-2000 90090 022 ***150.00

Principal Place of Business

417 NE 3RD AVENUE
FT. LAUDERDALE FL 33301

Mailing Address

1322 SW 27TH AVE
DEERFIELD BEACH FL 33442-5903

2. Principal Place of Business

1322 SW 27th Ave.

3. Mailing Address

Suite, Apt. #, etc.

City & State

Deerfield Beach

City & State

4. FEI Number

59-2831601

Applied For

Not Applicable

Zip

33442

Country

BROWARD

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MOSSER, MICHELLE G.
417 NE 3RD AVENUE
FT. LAUDERDALE FL 33301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip/Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Michelle G. Mosser Michelle G. Mosser

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DPS
MOSSER, MICHELLE G.
1322 SW 27TH AVE
DEERFIELD BEACH FL 33442 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Michelle G. Mosser Michelle G. Mosser

Date

Daytime Phone #

954-421-8111

CR2E034 (9/99)