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

PROFIT CORPORATION ANNUAL REPORT

1997



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K15016

MCGILL HOLDINGS, INC.

STREET ADDRESS

Dity-St-2iP

Principal Place of Business Mailing Address C/O SPIEGEL & SPIEGEL, P.A. C/O SPIEGEL & SPIEGEL, P.A. 10 FAIRWAY DRIVE, SUITE 303 10 FAIRWAY DRIVE, SUITE 303 DEERFIELD BEACH FL 33441-1898 DEERFIELD BEACH FL 33441 3. Date Incorporated or Qualified 3a. Date of Last Report 02/08/1988 07/08/1996 2. Principal Place of Business Mailing Address 4. FEI Number Applied For 65-0323057 26 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired П Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 **Trust Fund Contribution** Added to Fees Country Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent A1 Name DEBEER. DAVID 1222 SEABREEZE AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) FT LAUDERDALE FL 33316 83 84 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 Signature, typerd or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. Addition DELETE PS 1.1 TITLE Change TILLE DEBEER, DAVID NAME 1.2 NAME 1222 SEABREEZE BLVD STREET ADDRESS 1.3 STREET ADDRESS FT LAUDERDALE FL CITY-S1-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition THUE 2.1 TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS CITY - \$1 - ZIP 2.4 City-St-ZIP DELETE ☐ Change Addition THE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TULE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY - ST - 7IP 4.4 CITY - ST - ZIP DELETE ☐ Change Addition 5.1 TOLE THE 5.2 NAME NAM: STREET ADDRESS 5.3 STREET ADDRESS CHY-SI-ZIP 5.4 CITY - ST - ZIP DELETE Change ☐ Addition TITLE 6.1 TITLE 6.2 NAME NAM:

appears in Block 12 or k 13 if changed DAVID & DEBEER 4-17-97 SIGNATURE:

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP 14. I do 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 by the receiver or justee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

FILED

Apr 23 1997 8:00am

Secretary of State