FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **K47894** **(6)**

1. Corporation Name

MG ILLINOIS CORPORATION

Principal Place of Business	Mailing Address
C/O SEA AIR MOTEL 41 DEVON DRIVE CLEARWATER FL 34630	C/O SEA AIR MOTEL 41 DEVON DRIVE CLEARWATER FL 34630

3. Date Incorporated or Qualified: **11/30/1988**

3a. Date of Last Report: **04/25/1995**

4. FEI Number: **59-2928305** ☐ 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 has elected for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business (21)

Suite, Apt. #, etc. (22)

City & State (23)

Zip (24) Country (25)

2a. Mailing Address (26)

Suite, Apt. #, etc. (27)

City & State (28)

Zip (29) Country (30)

9. Name and Address of Current Registered Agent

HAMMOND, JAMES M.
1150 CLEVELAND STREET
SUITE 400
CLEARWATER FL 34615

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 617.1508, 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

12. OFFICERS AND DIRECTORS

TITLE	PCD	☐ DELETE
NAME	GRDIC, JOHN	
STREET ADDRESS	5636 S. MCVICKER	
CITY-ST-ZIP	CHICAGO IL	
TITLE	D	☐ DELETE
NAME	GRDIC, MARIA	
STREET ADDRESS	5636 S. MCVICKER	
CITY-ST-ZIP	CHICAGO IL	
TITLE	VPD	☐ DELETE
NAME	MARTINCIC, JOSIP	
STREET ADDRESS	8505 S. STATE ROAD	
CITY-ST-ZIP	BURBANK IL	
TITLE	STD	☐ DELETE
NAME	MARTINCIC, ANNA	
STREET ADDRESS	8505 S. STATE ROAD	
CITY-ST-ZIP	BURBANK IL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

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 do hereby certify that the information supplied with this filing is true, and that I am familiar with and accept the obligations of Section 607.0505, Florida Statutes. I further certify that the information indicated on this 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 X in Block 13.

SIGNATURE: JOHN GRDIC PRES. *John Grdic* 4/16/96 (813) 446-3321

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number

CR2E034 (12/95)