

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2002 8:00 am
Secretary of State

04-30-2002 90018 029 ****50.00

DOCUMENT # L01000018088

1. Entity Name
MGC INVESTMENTS, LLC

Principal Place of Business

**571 NW 38TH STREET
 OAKLAND PARK FL 33309**

Mailing Address

**571 NW 38TH STREET
 OAKLAND PARK FL 33309**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1151139

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

**SPIGLER, KAREN J
 499 NW 70TH AVENUE, #105
 PLANTATION FL 33317**

7. Name and Address of New Registered Agent

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

571 NW 38th Street

City
OAKLAND PARK

FL

Zip Code
33309

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 *[Signature]*
 Signature, typed or printed name of registered agent and title if applicable

President

(NOTE: Registered Agent signature required when reinstating)

4-17-02

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By May 1, 2002

9. MANAGING MEMBERS/MANAGERS

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
President
Mike Cocking
571 NW 38th St
OAKLAND PARK FL 33309

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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10. ADDITIONS/CHANGES

TITLE
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11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *[Signature]*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

4-17-02 954-630 9717

CR2E083 (9/01)