

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

FILED
May 06 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # L47706 (1)
 1. Corporation Name
M. T. G. DEVELOPMENT, INC.



Principal Place of Business C/O MELVIN T. GOLDBERGER 1700 S. DIXIE HIGHWAY, STE. 2A BOCA RATON FL 33432	Mailing Address C/O MELVIN T. GOLDBERGER 1700 S. DIXIE HIGHWAY, STE. 2A BOCA RATON FL 33432
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 01/29/1990 4. FEI Number 65-0181470 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees 7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent GOLDBERGER, MELVIN T. 1700 S. DIXIE HIGHWAY STE. A BOCA RATON FL 33432				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 7050 Isle Grove Place 83 84 City Boca Raton FL 85 Zip Code 33433	

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <input type="checkbox"/> DELETE GOLDBERGER, MELVIN T. 1700 S. DIXIE HWY. BOCA RATON FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7050 Isle Grove Place Boca Raton, FL 33433
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC <input type="checkbox"/> DELETE GOLDBERGER, BETTY M. 1700 S. DIXIE HWY. BOCA RATON FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7050 Isle Grove Place Boca Raton, FL 33433
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD <input type="checkbox"/> DELETE GRUENBERG, SUSAN 1700 S. DIXIE HWY. BOCA RATON FL	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7050 Isle Grove Place Boca Raton, FL 33433
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD <input type="checkbox"/> DELETE HURST, MARGIE 1700 S. DIXIE HWY. BOCA RATON FL	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7050 Isle Grove Place Boca Raton, FL 33433
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS <input type="checkbox"/> DELETE ZWICKAU, DIANE 1700 S. DIXIE HWY. BOCA RATON FL	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7050 Isle Grove Place Boca Raton, FL 33433
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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 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 address.

SIGNATURE: *[Signature]* 4/1/98 954-423-0515

CR2E034 (10/97)