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FILED
May 16 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **N94000004750 (5)**

1. Corporation Name

MZ. GOOSE, INC. (SEE DORIS MC IN NEW FILING BEFO

Principal Place of Business	Mailing Address
10203 S.W. 169 TERRACE MIAMI FL 33157	10203 S.W. 169 TERRACE MIAMI FL 33157-4223

[redacted] Incorporated or Qualified: **09/26/1994**

3a. Date of Last Report: **05/01/1996**

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

4. FEI Number: **65-0522787** ☐ 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 liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

GAGE, HELEN H
10203 S.W. 169 TERRACE
MIAMI FL 33157

10. Name and Address of New Registered Agent

61 Name

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

63

64 City **FL** 65 Zip Code

11. Pursuant to the provisions of Sections 617.0502 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 617.0503, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☑ DELETE	1.1 TITLE (P)	P	☐ Change ☑ Addition
NAME	LEWIS CANTY		1.2 NAME	GEORGE SHIM	
STREET ADDRESS	11799 BAILES RD.		1.3 STREET ADDRESS	10201 S.W. 169 Terr	
CITY-ST-ZIP	GOULDS FL 33170		1.4 CITY-ST-ZIP	MIAMI, FL 33157	
TITLE	ST	☑ DELETE	2.1 TITLE (ST)	FRANCIS FORBES	☐ Change ☑ Addition
NAME	SIMMS, JACQUELYN		2.2 NAME	12257 S.W. 201 TERR.	
STREET ADDRESS	16920 SW 107 CT		2.3 STREET ADDRESS	MIAMI, FL 33177	
CITY-ST-ZIP	MIAMI FL		2.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	3.1 TITLE	D	☑ Change ☐ Addition
NAME	HELEN GAGE		3.2 NAME	WILLIE MAE PHIPPS	
STREET ADDRESS	10203 S.W. 169 TERR.		3.3 STREET ADDRESS	10555 N.W. 30 Ct.	
CITY-ST-ZIP	MIAMI FL 33157		3.4 CITY-ST-ZIP	MIAMI, FL 33147	
TITLE	D	☑ DELETE	4.1 TITLE	(D)	☐ Change ☑ Addition
NAME	HARTLEY, WILLIE MAE	New Name address	4.2 NAME	ELAINE BROWN	
STREET ADDRESS	14155 SW 107 CT		4.3 STREET ADDRESS	440 NW 122 ST	
CITY-ST-ZIP	MIAMI FL		4.4 CITY-ST-ZIP	N. MIAMI, FL 33168	
TITLE	D	☑ DELETE	5.1 TITLE	(D)	☐ Change ☐ Addition
NAME	JAMES H. WALKER		5.2 NAME	LEWIS CANTY	
STREET ADDRESS	16115 S.W. 117 AVE STE 25		5.3 STREET ADDRESS	11799 BAILES RD.	
CITY-ST-ZIP	MIAMI FL 33177		5.4 CITY-ST-ZIP	GOULDS, FL 33170	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (9/96)

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 or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Helen H Gage 4-28-97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone # 0031249