

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 DEC 19 PM 2:35

DOCUMENT # *00000098883*

1. Entity Name

MGM Services, Inc.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
2843 S. Bayshore Drive

3. Mailing Address
100 Almeria Avenue

Suite, Apt. #, etc.
4-F

Suite, Apt. #, etc.
230

City & State
Coconut Grove, FL

City & State
Coral Gables, FL

Zip
33133

Country
USA

Zip
33134

Country
USA

REINSTATEMENT *03*

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1048690

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
De Leon, Melio

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

2843 S. Bayshore Drive, # 4-F

City
Coconut Grove

FL Zip Code
33133

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
De Leon, Helio (President)
2843 S. Bayshore Dr., #4-F
Coconut Grove, FL 33133

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

12/19/03 - 01044 - 001 **150.00
000025635670
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12. 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 or supplemental 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Helio De Leon

12/11/03

(305) 529-0345

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #



GARCIA, ESPINOSA, MIYARES
AND COMPANY, LLP

December 11, 2003

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: MGM Services, Inc.
Document #: P00000098883
Annual Report Filing 2003

Dear Sir or Madam:

This letter is regarding the Annual Report filings for MGM Services, Inc. It has been brought to our attention that our client has not received an annual report. After speaking with a representative at the Department of State we came to the conclusion that an incorrect address is on file with the State. Please find enclosed a check in the amount of \$150.00 for the 2003 Uniform Business Report Filing. We are requesting that the penalties and interests for filing the Annual Report past due be abated due to this misunderstanding.

Please up date your records to reflect the correct address as follows:

Place of Business: 2843 S. Bayshore Drive
4-F
Coconut Grove, FL 33133

Mailing Address: 100 Almeria Avenue
Suite 230
Coral Gables, FL 33134

If you have any questions, Please feel free to contact me. Thank you in advance for your prompt attention regarding this matter.

Sincerely,
GARCIA, ESPINOSA, MIYARES & CO, LLP.



Terry Reyes

For the Firm