

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2004 08:00 AM
Secretary of State

DOCUMENT # P01000022212 1. Entity Name MGM EXPORTS, INC.	
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Principal Place of business 123 MADEIRA AVE. #203 CORAL GABLES, FL 33134	Mailing Address 123 MADEIRA AVE. #203 CORAL GABLES, FL 33134
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DO NOT WRITE IN THIS SPACE



01112004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-1118882	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

WEISS, MICHAEL N ESQ.
C/O MICHAEL WEISS & ASSOCIATES, P.A.
1401 BRICKELL AVE., STE. 300
MIAMI, FL 33132

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IN THIS SPACE**

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 _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 fee will be \$350.00

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	D PATEL, MAGANBHAI G 123 MADEIRA AVE, SUITE 203 CORAL GABLES, FL 33134
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D PATEL, DIPAN M 123 MADEIRA AVE, SUITE 203 CORAL GABLES, FL 33134
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D PATEL, NISITH M 123 MADEIRA AVE, SUITE 203 CORAL GABLES, FL 33134
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D PATEL, GAUTAM M 123 MADEIRA AVE, SUITE 203 CORAL GABLES, FL 33134
TITLE NAME STREET ADDRESS CITY- ST- ZIP	
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U00000005935
01/16/04-80013-014 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Gautam Patel **GAUTAM PATEL** 01/11/2004 305-610-2331
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #