

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 15, 2003 8:00 am
Secretary of State

09-15-2003 90153 017 ***150.00

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DOCUMENT # P02000029986

1. Entity Name
MSG ENTERPRISES, INC.



Principal Place of Business
3414 LEIGH ROAD
POMPANO BEACH FL 33062

Mailing Address
3414 LEIGH ROAD
POMPANO BEACH FL 33062

2. Principal Place of Business
3414 Leigh Rd
Suite, Apt. # etc.

3. Mailing Address
3414 Leigh Rd
Suite, Apt. #, etc.

City & State
Pompano Beach FL
Zip 33062 Country USA

City & State
Pompano Beach FL
Zip 33062 Country

4. FEI Number 01-0659241 Applied For Not Applicable

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

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

GROODY, MICHAEL G
3414 LEIGH ROAD
POMPANO BEACH FL 33062

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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 \$550.00
After September 10, 2003 Fee will be \$750.00
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	President Michael Groody 3414 Leigh Rd Pompano Beach FL 33062	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Michael Groody
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/4/03
Date

954 781-9941
Daytime Phone #

CR2E034 (4/03)

ATTACHMENT


P02000029986

80148134

TO WHOM IT MAY CONCERN,

I MICHAEL GROODY AM THE PRESIDENT OF OF MSG ENTERPRISES INC. PLEASE BE NOTIFIED THAT THE ORIGINAL UBR WAS NEVER RECEIVED. THIS IS A NEW BUSINESS AND I AM SENDING THE PROPER PAYMENT AND COMPLETED FORM. ANY QUESTIONS YOU CAN CALL ME AT (954)781-9941.

THANK YOU



MICHAEL GROODY