2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000063051

Entity Name: MGC, INC.

City-St-Zip:

SHALLMAR, FL 32579

FILED Jan 10, 2003 Secretary of State

Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
220 ELGIN PKWY SE, SUITE 5 FT. WALTON BCH, FL 32548				503-B MARY ESTHER CUT-OFF BLVD. FT. WALTON BCH, FL 32548	
Current Mailing Address:			New Mailing Add	New Mailing Address:	
220 ELGIN PKWY SE, SUITE 5 FT. WALTON BCH, FL 32548			P.O. BOX 1419 FT. WALTON BCH	P.O. BOX 1419 FT. WALTON BCH, FL 32549	
FEI Number	: 30-0091493	FEI Number Applied For()	FEI Number Not Applicable (Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Addres	Name and Address of New Registered Agent:	
SCHLICHTE, MATTHEW J 2134 HOLLYWOOD BLVD. HOLLYWOOD, FL 33020			P.O. BOX 1419	GHOSH, JAYANTA P.O. BOX 1419 FORT WALTON BEACH, FL 32549	
	named entity e of Florida.	submits this statement for the p	ourpose of changing its regist	ered office or registered agent, or both,	
SIGNATURE: JAYANTA GHOSH				01/10/2003	
	Electro	nic Signature of Registered Ag	ent	Date	
	mpaign Financin S AND DIREC	g Trust Fund Contribution(). ETORS:	ADDITIONS/CHA	NGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD (MARSHALL, JA 555 ALLENDAI FT. VALLEY, G	_E RD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD (CORBIN, THEF 855 MASTERS SHALLMAR, FI	BLVD.	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address:	VTD (GHOSH, JAYA 902 AVALON L		Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: JAYANTA GHOSH VTD 01/10/2003