FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT #

P93000012146 (5)

M.B. DESIGN GROUP INC.

Mailing Address

2809 EMBASSY DRIVE W. PALM BEACH FL 33401

Principal Place of Business

2809 EMBASSY DRIVE



W. PALM BEACH FL 33401		W. PALM BEACH FL 33401			
				3. Date Incorporated or Qualified 02/12/1993	3a. Date of Last Report 04/21/1995
	ace of Business CORPORATE WAY	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt		26 5725 CORPU	KATE WA	→ 65-0392077	Not Applicable
22 /03		Suite, Apt. #, etc. 27 /03		5. Certificate of Status Desired	\$8.75 Additional Fee Required
	LM BEACH FL	City & State 28 W PALM BC		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 3340			Country 30	This corporation has liability for in Florida Statutes	intangible tax under s. 199,032,
	9. Name and Address of Current	Registered Agent		10. Name and Address of New R	egistered Agent
	ARJORIE G		81 Name 82 Street	Address (P.O. Box Number is Not Acceptaty	(c)
	IBASSY DRIVE I BEACH FL 33401		83		
			84 City		85 Zip Code
11. Pursuant to or registere familiar wit	o the provisions of Sections 607.0502 a ed agent, or both, in the State of Florids h, and accept the obligations of, Section	nd 607.1508, Florida Statutes, Such change was authorized n 607.0505, Florida Statutes	the above named cuby the corporation's	orporation submits this statement for the purp board of directors. Thereby accept the appo	
SIGNATURE _	Signature, typeo or printed name of registeroid agent as	distributaçok able (NOTE)	Bogoverca Agent signature :	Burnel when persistings	DATE
:,	OFFICE AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	
TITLE	D	☐ DELETE	1 1 Tifuf	D	Change Addition
NAME STREET ADDRESS	GOLDBERG, ALISA S 2809 EMBASSY DRIVE		1.2 NAME 1.3 STREET ADDRESS	ALISA MALTZ 10270 ALAMANDA BLUD	•
CITY-ST-ZIP	W. PALM BEACH FL		14 0 (1Y + ST - ZIP	Parm Bench Gardn	no. Flerio
TITLE	D	DELETE	2 1 TIFLE		Change Addition
NAME	BERG, MARJORIE G		2.2 NAME		1
STREET ADDRESS	2809 EMBASSY DRIVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	W. PALM BEACH FL		2.4 CITY - ST - ZIP		į.
TITLE		☐ DELETE	3 1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIF			3 4 CITY - ST - ZIP		
THTLE		☐ DELFTE	4 1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			43 STREFT ADDRESS		
CITY-ST-ZIP			4 4 CITY - ST - ZIP		
TITLE		☐ DELETE	5 1 TifleF		Criange Addition
NAME			5 2 NAME		
STREET ADDRESS			53 STREET ADDRESS		
CITY - ST - ZIP			5.4 CHY-ST-ZIP		
TITLE		☐ DELETE	6 1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS		i	6 3 STREET ADDRESS		
CITY - ST - ZIP			64 CITY - S1 - ZIP		
14. Tao hereby	certify that the information supplied with	this filma is voluntarily furnished	d and does not qual	ity for the exemption stated in Section 110.0	7/2/03 Etc./de-Ottob

of the eye certify that the information supplied with this fifting is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE

MALLOTICE SHELL STORE OF SIGNING OFFICER SAIDIRECTOR

4/1/96

407 . 684 . 3679

Daytime Priorie #

CR2E034 (12/95)