


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 21, 2005 08:00 AM
Secretary of State

DOCUMENT # P93000037986 1. Entity Name MG WAREHOUSE CORP.	
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Principal Place of Business 1600 NE 12TH TERR FORT LAUDERDALE, FL 33305 US	Mailing Address 3164 INVERNESS FORT LAUDERDALE, FL 33332-1816 US
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DO NOT WRITE IN THIS SPACE



03262005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0420130	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

NILSEN, RICHARD B
3164 INVERNESS
FORT LAUDERDALE, FL 33332-1816

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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 _____ (NOTE: Registered Agent signature required when reinstating)
Signature, typed or printed name of registered agent and title if applicable. DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000322045 04/21/05-80103-019 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTSD NILSEN, RICHARD 3164 INVERNESS FORT LAUDERDALE, FL 333321816
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD NILSEN, CANDICE 3164 INVERNESS FORT LAUDERDALE, FL 333321816
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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)(f), 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: Richard B. Nilsen **15 APR 05** **954-384-7434**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #