## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P94000034601 (2)

BEG & MG COMMUNICATIONS, INC.

FILED Apr 14 1998 8:00am Secretary of State

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Principal Place of Business Mailing Address						T I COULDED THE INTER DIGHT DEHT QUITE		
5728 MAJOR BLVD 5728 MAJOR BLVD								
SUITE 200		SUITE 200				DO MOT MIDITE IN THIS ODAGE		
ORLANDO FL	. 32819	ORLANDO FL 32819	ORLANDO FL 32819			DO NOT WRITE IN THIS SPACE		
Ì						3. Date Incorporated or Qualified 04/28/1994		
2. Principal Pl	ace of Businoss	2a. Mailing Address					pplied For	
21		26				1	ot Applicable	
Suite, Apt. (	V, etc.	Suite, Apt. #, etc.				\$8.75	Additional	
22		27					equired	
City & State	)	City & State				6. Election Campaign Financing \$5.00	May Be	
23		28				, , , , , , , , , , , , , , , , , , , ,	to Fees	
Zip	Country	Zip	Cou	Country		8. This corporation owes or has paid the current year in	tangible	
24	25	29	30	30		Personal Property Tax due June 30.	_ No	
	9. Name and Address of Curren	nt Registered Agent				10. Name and Address of New Registered Agent		
MA	SSIMILIANO, BIFFI			81	Name			
572	5728 MAJOR BLVD., #200			82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
	LANDO FL 32819					• • • • • • • • • • • • • • • • • • • •		
				83				
				84	City	ier 7in	Code	
				04	City	FL  85   Zip	C000	
11. Pursuant t	o the provisions of Sections 607.050	2 and 607.1508, Florida Stat	utes, the al	DOVE	a-named corpo	oration submits this statement for the purpose of changing	its registered	
agent. I ar	egistered agent, or both, in the State in familiar with, and accept the oblig	of Florida, Such change was ations of, Section 607.0505. I	s authorize Florida Stal	d by tutes	/ the corporation	on's board of directors. I hereby accept the appointment as	s registered	
SIGNATURE	, , ,							
SIGNATURE	Signature, typed or printed name of registered ago	of and tille if applicable (N	OTE Registere	d Age	ent signature require	d when reinstating) DATE	<del></del>	
12.	OFFICERS AN		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTO		
TOLE	PVD	☐ DELETE	1.1 TI	TLE		☐ Change	Addition	
NAME	BIFFI, MASSIMILIANO		1.2 N	AME	İ			
STREET ADDRESS			1.3 \$1	1.3 STREET ADDRESS				
CITY-S1-ZIP			1.4 CI	TY-S	IT - ZIP			
TITLE	VP □ DELETE 2.1		2.1 TI	TLE		☐ Change	Addition	
NAME	CEDRATI, ELISABETTA		2.2 NAME					
STREET ADDRESS	5728 MAJOR BLVD. #200		2.3 STREET ADDRESS		ADDRESS			
CITY-ST-ZIP	ORLANDO FL		2.40	2. 4 CITY - ST - ZIP				
TITLE	☐ DELE		3.1 TI	3.1 TITLE		☐ Change	☐ Addition	
NAME			3.2 N/	AME				
STREET ADDRESS			3.3 ST	REET	ADORESS			
CITY-ST-ZIP			3.4. C	ITY-S	ST-ZIP	·		
TITLE	DELETE 4.1		4.1 TI	TLE		☐ Change	Addition	
NAME			4.2 N	AME				
STREET ADDRESS			4.3 ST	REET	ADDRESS			
CITY-ST-ZIP			4.4 CI	TY-S	T-ZIP			
TITLE	DELETE 5.1		5.1 11	5.1 TITLE		☐ Change	Addition	
NAME			5.2 N/	AME				
STREET ADDRESS			5.3 \$1	REET	ADDRESS			
CITY-ST-ZIP			5 4 CI	TY-S	IT-ZIP			
TITLE				6.1 TITLE		☐ Change	Addition	
NAME			6.2 N	AME				
STREET ADDRESS					ADORESS			
CITY-ST-ZIP			6.4 CI					
44 15		77. 71. 77. 17.	2 0.7 01	3	* ***	0		

4. 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 informatio 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:

Marhelace fats / President

407-351-1390

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