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PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P94000077903 (0)

1. Corporation Name

MIG MANAGEMENT SERVICES OF PENNSYLVANIA, INC.

Principal Place of Business

Mailing Address

250 AUSTRALIAN AVE. S.  
SUITE 400  
WEST PALM BEACH, FL.  
33401

250 AUSTRALIAN AVE. S.  
SUITE 400  
WEST PALM BEACH, FL.  
33409

3. Date Incorporated or Qualified  
10/24/1994

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JANE S. GOLDBERGER  
250 AUSTRALIAN AVE. S., STE 400  
WEST PALM BEACH, FL. 33401

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	DELETE
D	WAYMAN, EDWIN B.	250 AUSTRALIAN AVE S. # 400	WEST PALM BEACH, FL 33401	<input type="checkbox"/>
D	WRIGHT, LARRY E.	250 AUSTRALIAN AVE. S. #400	WEST PALM BEACH, FL 33401	<input type="checkbox"/>
D	COTE, JAMES A.	1990 N. CALIFORNIA BLVD, STE 600	WALNUT CREEK CA 94596	<input type="checkbox"/>
P	LOUIS E. VOLT	250 AUSTRALIAN AVE S. #400	WEST PALM BEACH, FL 33401	<input type="checkbox"/>
S/TN	KATHLEEN L. BUTIN	250 AUSTRALIAN AVE S. #400	WEST PALM BEACH, FL 33401	<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY, ST, ZIP	Change	Addition
21 TITLE	22 NAME	23 STREET ADDRESS	24 CITY, ST, ZIP	<input type="checkbox"/>	<input type="checkbox"/>
31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY, ST, ZIP	<input type="checkbox"/>	<input type="checkbox"/>
41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY, ST, ZIP	<input type="checkbox"/>	<input type="checkbox"/>
51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY, ST, ZIP	<input type="checkbox"/>	<input type="checkbox"/>
61 TITLE	62 NAME	63 STREET ADDRESS	64 CITY, ST, ZIP	<input type="checkbox"/>	<input type="checkbox"/>

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14. I do hereby certify that the information supplied with this filing 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KATHLEEN L. BUTIN, VP/SEC/TREAS

3/5/96 (407) 820-1300

Date

Telephone #

CR2E034 (12/95)