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 # P95000021820 (2)

MGB COMMERCIAL, INC.

FILED May 15 1998 8:00am Secretary of State



Principal Place of Business	Mailing Address			E filian wand follê 14êlî enn 10êl
7720 WEST COMMERCIAL BLVD	2075 NE 164TH ST			
LAUDERHILL FL \$3351 SUITE #102			DO NOT WRITE IN THIS SPACE	
	N MIAMI BEACH FL 33162		3, Date Incorporated or Qualified	110 OF ACE
			03/16/1995	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 4032 N. 29 AUC	26 4032 N.	29 AUE.	65-0646671	Not Applicable
Suite, Apt #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22	27		5. Certificate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Howwood, Fr	28 HOLLYWOOD		Trust Fund Contribution	Added to Fees
Zip Country 25 330 20 25	29 33020 3	Country	 This corporation owes or has paid the Personal Property Tax due June 30. 	current year Intangible
9. Name and Address of Curre		<u> </u>	10, Name and Address of New Register	· · · · · · · · · · · · · · · · · · ·
BI Name				
1031 IVES DAIRY ROAD SUITE 12	25	1 176	RBEATI.HIRSCHBERG	
MIAMI FL 33179	82 Street Add	ress (P.O. Box Number is Not Acceptable)		
MINIMITE COTTO		83	11.	
		341	re 5	land 75 Octo
		84 City tou	LYW000	L 85 Zip Code 3302/
11. Pursuant to the provisions of Soctions 607.05	502 and 607.1508, Florida Statutes	the above-named corr	poration submits this statement for the purpos	se of changing its registered
office or registered agent, or/both, in the State agent. I am familiar with, and accept the obli	te of Florida. Such change was au gations of, Section 607.0605, Flori	thorized by the corpora da Statules.	tion's board of directors. I hereby accept the	appointment as registered
SIGNATURE HERG			4/9/9	8
Stone free indeed or purited name of dignitized agent and title if applicable. / (NOTE: Registered Agent signature required when reinstalling) DATE				
	ND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS	Change Addition
TITLE PSD	☐ pereie	1.1 TITLE		
NAME OSHER, MARTIN STREET ADDRESS 1912 S. OCEAN DR #D15		1.2 NAME		
11111 1110 11 5 51 00000		1.3 STREET ADDRESS		
CITY-ST-ZIP HALLANDALE FL 33009	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		☐ Change ☐ Addition
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP		2.4 CITY-ST-ZIP		
TITLE	DELETE	3.1 TITLE		Change Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY-ST-ZIP		
TITLE	DELETE	4.1 TITLE		Change Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY+ST-ZIP		
TITLE	DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE	DELETÉ	6.1 TITLE		Change Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP	ist. Also file and a self-of-	6.4 CITY - ST - ZIP	Cartino 140 07/000 Florida Ciatatos Marita	

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.

10=4/9/2-16/8