

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000045163

1. Entity Name

MLG CONSULTANTS, INC.

FILED

Jan 29, 2000 8:00 am  
Secretary of State

01-29-2000 90099 012 \*\*\*150.00

Principal Place of Business

Mailing Address

5555 COLLINS AVE #16M  
MIAMI BEACH FL 33140

5555 COLLINS AVE #16M  
MIAMI BEACH FL 32712-2123

2. Principal Place of Business

985 ENCOURTE GREEN

3. Mailing Address

985 ENCOURTE GREEN

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

APOKA, FLORIDA

City & State

APOKA, FL

4. FEI Number

65-0588985

Applied For

Not Applied For

Zip

32712-2123

Country

ORANGE

Zip

32712-2123

Country

ORANGE

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required ~

6. Name and Address of Current Registered Agent

GONZALEZ, MIRIAM K  
5555 COLLINS AVE #16M  
MIAMI BEACH FL 33140

7. Name and Address of New Registered Agent

Name GONZALEZ, MIRIAM K  
Street Address (P.O. Box Number is Not Acceptable)  
985 ENCOURTE GREEN

City APOKA

FL

Zip Code  
32712-2123

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PSD  
NAME GONZALEZ, MIRIAM K  
STREET ADDRESS 5555 COLLINS AVE #16M  
CITY-ST-ZIP MIAMI BEACH FL 33140 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PSD  
NAME GONZALEZ, MIRIAM K  
STREET ADDRESS 985 ENCOURTE GREEN  
CITY-ST-ZIP APOKA, FL 32712-2123 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Miriam K Gonzalez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN-21-2000

Date

(407) 464-0822

Daytime Phone #