## 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 # P95000062816 (0)

M J G ENTERPRISES OF PINELLAS INC.

**FILED** Feb 03 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						- I IRBUIDAL JUD IDUDU DUDU DUDU BOJEL BAI	II 89110 BIRR II 81 19191 I	IBIE BIII <del>I</del> BBI
6741 102ND AVE N UNIT 29 & 30 PINELLAS PARK FL 33782-2970 US						DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified		
A Delevision of D	lace of Business		Le- Molling Address			08/15/1995 4. FEI Number		Spind For
_	IACE OF BUSINESS	2a. Mailing Address	<del></del>			59-3332875	<del></del>	Applied For Not Applicable
21 Suite, Apt.	# etc	Suite, Apt. #, etc.	Suite, Apt. #, etc.				\$9.75	Additional
22	, <del></del>		27			5. Certificate of Status Desired	1 1	Required
City & State	9	City & State	4			6. Election Campaign Financing	\$5.0	D May Be
23		28	28			Trust Fund Contribution		to Fees
Zip	Country	Zip	Cou	ntry		8. This corporation owes or has pa		'
24	25 29 30			Personal Property Tax due June 30. X Yes No				
e. Name and Address of Current Registered Agent					Manage	10. Name and Address of New Re-	gistered Agent	· · · · · · · · · · · · · · · · · · ·
	ARK, AL			81	Name			
	300 S. BELCHER RD.		82 Street Addre			ss (P.O. Box Number is Not Acceptab	le)	
	ITE 104 E			83			<del> </del>	
LAI	RGO FL 34643			اِ				
				84	City		FL 85 Zip	Code
44 Pursuant	to the provisions of Sections 607.09	502 and 607 1508 Florida Statute:	s, the ab	nove	-named corpo	ration submits this statement for the p	urgose of changing	its registered
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 of the state of Florida St								
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE	Signature, typed or printed name of registered a	agent and title if applicable. (NOTE:	1 Ager	nt signature required	d when reinstating)	DATE		
12,	OFFICERS A	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC		
TITLE	P	☐ DELETE	1.1 TII	LE				Addition
NAME GURNEY, MELVIN J.			1.2 NAME					
STREET ADDRESS	3322 FOX HUNT DR.		1.3 STREET ADDRESS		ADORESS			
CITY-ST-ZIP	PALM HARBOR FL	T DECEM	1.4 CITY - S		I - ZIP		☐ Change	Addition
TITLE		DELETE					C Cliange	C Vanition
NAME			2.2 NAMI		1000000			-
STREET ADDRESS					ADDRESS		•	
CITY-ST-ZIP TITLE		DELETE	2.4 CITY-ST-ZIP 3.1 TITLE		1-21		Change	Addition
NAME			3.2 NA				•	
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP			3.4. C	TY-S	T-ZIP			
TITLE		DELETE	4.1 TI				Change	Addition
NAME			4. 2 N	AME				
STREET ADDRESS			4.3 ST	REFT	ADDRESS			
CITY-ST-ZIP			4.4 CI	Y-ST	1-2IP			
TITLE	DELETE		5.1 Ti	5.1 TITLE			Change	Addition
NAME			5.2 NA	ME				
STREET ADDRESS			5.3 ST	REET A	ADDRESS			
CITY-ST-ZIP		DOUTE	5.4 CI		- ZIP		Change	☐ Addition
TITLE		☐ DELETE	6.1 Til				L Unange	□ Addriged
NAME			6.2 NA					
STREET ADDRESS					ADDRESS			
CITY+ST-ZIP			6.4 CI	Y-SI	-ZIP	140.07/0//2 50.07	7	

14. 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 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.

1-26-08