FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

	P95000078395	(7)
1. Corporation Name		

MG & G CORPORATION

22

Mailing Address Principal Place of Business 1915 LAVERS CIRCLE, STE. E-105 1915 LAVERS CIRCLE. STE. E-105 DELRAY BEACH FL 33445 DELRAY BEACH FL 33445 3a. Date of Last Report 3. Date Incorporated or Qualified 10/09/1995 FEI Number 2a. Mailing Address 2. Principal Place of Business 65-0652339 26 21 \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Suite, Apt. #, etc.

City & State City & State Added to Fees Trust Fund Contribution 28 8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Pres No 23 Country Źψ Country Zφ 30 29 25 24 9. Name and Address of Current Registered Agent

FLAM, MICHAEL-R' GREENSPOON, MARDER, ET AL. 100 WEST CYPRESS CREEK RD, STE. 700 FT. LAUDERDALE FL 33309

	10. Name and Address of New Registered Agent								
81	Name								
82	Street Addre	ss (P.O. Box Numb	per is Not Acceptab	e)	_				
83			_						

6. Election Campaign Financing

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.

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HTY-SI-ZIE	by certify that the information supplied with this filing is voluntar	6 4 0 I I Y - ST - ZIF	or the exemption stated in Section 119.07(3)(k). Florid	a Statutes	s. I furthe

g is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(x), Fronda Statules, Fluring Supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under freceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name I do hereby certify that the information assumed certify that the information indicated on the annulously that I am an officer or director of the corporate in Rhock 12 or Block 3 if dryinged, or consideration. gment with an address appears in Block 12 or Block

SIGNATURE: AND TYPED OR BUINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/12/96

Applied For

Fee Required

\$5.00 May Be

Not Applicable