

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 15 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P95000096601 (6)

1. Corporation Name
MGB ANDREWS, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business
6301 NORTH ANDREWS AVENUE
FT. LAUDERDALE FL 33339

Mailing Address
2075 N.E. 164TH STREET
#102
N. MIAMI BEACH FL 33162

2. Principal Place of Business
21 4032 N. 29 AVE.
Suite, Apt. #, etc.
22
City & State
23 HOLLYWOOD, FL
Zip
24 33020
Country
25

2a. Mailing Address
26 4032 N. 29 AVE.
Suite, Apt. #, etc.
27
City & State
28 HOLLYWOOD, FL
Zip
29 33020
Country
30

3. Date Incorporated or Qualified
12/21/1995

4. FEI Number
65-0755016
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
ROGOVIN, LAWRENCE H
1031 IVES DAIRY RD., STE. 125
N. MIAMI BEACH FL 33179

10. Name and Address of New Registered Agent
81 Name HERBERT L. HIRSCHBERG
82 Street Address (P.O. Box Number is Not Acceptable)
4700 SHERIDAN ST.
83 SUITE 5
84 City HOLLYWOOD
85 Zip Code FL 33021

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 *HERBERT L. HIRSCHBERG* DATE 4/9/98

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
PD	OSHER, MARTIN	1912 S.OCEAN DRIVE, #D-15	HALLANDALE FL 33009	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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.

SIGNATURE: *[Signature]* DATE: 4/24/98 1998 972-1118

CR2E034 (10/97)