

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000027386

1. Entity Name

M P DESIGN GROUP, INC.

FILED
Jul 24, 2000 8:00 am
Secretary of State

07-24-2000 90007 048 ***150.00

Principal Place of Business

11000 PROSPERITY FARMS RD
101
PALM BEACH GARDENS FL 33410
US

Mailing Address

11000 PROSPERITY FARMS RD
101
PALM BEACH GARDENS FL 33410
US

2. Principal Place of Business

11000 Prosperity Farms Rd.

3. Mailing Address

11000 Prosperity Farms Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

STE 101

STE 101

City & State

City & State

Palm Beach Gardens, FL

Palm Beach Gardens, FL

Zip

10
33410

Country

US

Zip

10
33410

Country

US

6. Name and Address of Current Registered Agent

PLUNKETT, MICHAEL D
12705 86TH ROAD NORTH
WEST PALM BEACH FL 33412

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 **D** ☐ Delete
NAME **PLUNKETT, MICHAEL D**
STREET ADDRESS **12705 86TH ROAD NORTH**
CITY-ST-ZIP **WEST PALM BEACH FL 33412**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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CITY-ST-ZIP

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7.5.00

Date

561-624-7285

Daytime Phone #

CR20034 (1/00)

P94000027386

AD068652

ATTACHMENT
P970000077386

To whom it may concern,

I was very surprised to find a 2nd notice for the filing of this report in our mail. As we are very prompt in responding to mail of this sort, I immediately checked my financial and corporate records to see if we had in fact already filled this form out. As I found no record that we did, I asked the other member(s) of our office if they had seen or received the original notice, and in fact, no one had. I then called the Dept. of State / division of corporations and they told me that they had record of sending us the first / original form in January. I explained to them that we had no