

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000033364

FILED  
Apr 07, 2004  
Secretary of State

Entity Name: M.G. INTERNATIONAL SALES CORP.

**Current Principal Place of Business:**

5440 S.W. 156 PLACE  
MIAMI, FL 33185

**New Principal Place of Business:**

**Current Mailing Address:**

5440 S.W. 156 PLACE  
MIAMI, FL 33185

**New Mailing Address:**

FEI Number: 65-0663683

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GARCIA, MANUEL J  
5440 S.W. 156 PLACE  
MIAMI, FL 33185 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: GARCIA, MANUEL JR  
Address: 5440 S.W. 156 PLACE  
City-St-Zip: MIAMI, FL 33185

Title: V ( ) Delete  
Name: GARCIA, SOL A  
Address: 5440 SW 156 PLACE  
City-St-Zip: MIAMI, FL 33185

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SOL ANGEL GARCIA

V

04/07/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date