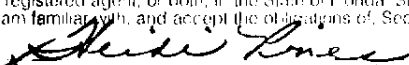


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 27 1998 8:00am
Secretary of State

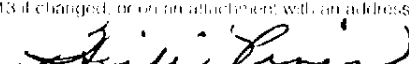
PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P960000042834 1. Corporation Name M & G FAMILY SERVICES, INC.			
Principal Place of Business 7911 NW 72ND AVE Suite 201A MEDLEY, FL 33166		Mailing Address 8357 W FLAGLER ST SUITE 366 MIAMI, FL 33144	
2. Principal Place of Business 21 7911 NW 72ND AVE Suite, Apt. #, etc. SUITE 201A City & State MEDLEY, FL Zip 33166 Country DADE		2a. Mailing Address 26 8357 W FLAGLER ST Suite, Apt. #, etc. SUITE 366 City & State MIAMI, FL Zip 33144 Country DADE	
9. Name and Address of Current Registered Agent HEIDI PINES 7911 NW 72ND AVE SUITE 201A MEDLEY, FL 33144		10. Name and Address of New Registered Agent 81 Name HEIDI PINES 82 Street Address (P.O. Box Number is Not Acceptable) 7911 NW 72ND AVE 83 SUITE 201A 84 City MEDLEY FL 85 Zip Code 33144	
11. Pursuant to the provisions of Sections 607.0942 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  HEIDI PINES DATE 4/24/98			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PRES. DEPT NAME UNIS HENRY STREET ADDRESS 7911 NW 72ND AVE, # 201A CITY-ST-ZIP MEDLEY, FL 33144		11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP	
TITLE V. PRESIDENT NAME HEIDI PINES STREET ADDRESS 8990 SW 6TH CT CITY-ST-ZIP PLANTATION, FL 33324		21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	
4. FCI Number 65-0667822	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	

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***150.00

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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:  HEIDI PINES DATE 4/24/98 305-234-2773

CR2E034 (10/97)