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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000051902 (0)

THE M-GROUP CORP.

Principal Place of Business

Mailing Address

FILED Apr 25 1997 8:00am Secretary of State



2545 MAGUA AVENUE COCONUT GROVE FL 33133		2545 INAGUA AVENUE COCONUT GROVE FL 33133-3811					
					3. Date Incorporated or Qualified 06/18/1996	3a. Date of Last Report	
	lace of Business	2a. Mailing Address			4. FEI Number	Applied For	
21 601	SE 3rd Ave.	26			65-0675244	Not Applicable	
Suite, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State 23 CRT	LAUDERDALE, TL	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24 333		7ip 29	Counti	ry 		Yes No	
g, Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent		
	RPORATION SERVICE COMPANY		8.	Name			
1201 HAYS STREET TALLAHASSEE FL 32301			8:	82 Street Address (P.O. Box Number is Not Acceptable)			
			8:	3			
			8	City		FL 85 Zip Code	
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							
	Signature, typed or printed name of registered agent			gent signature rec	quired when re-instating)	DATE	
12.	OFFICERS AND	DELETE	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12 Change Addition	
NAME	ROSSI, MARCO	Detere	1.1 TITLE 1.2 NAME			Charge C Addition	
STREET ADORESS	2545 INAGUA AVENUE			T ADDRESS			
CITY-ST-ZIP	COCONUT GROVE FL 33133		1.4 CITY	i) }	
TITLE	ST	DELETE	2.1 1111£			Change Addition	
NAME	ROSSI, MARGARET		2.2 NAME				
STREET ADDRESS	2545 INAGUA AVENUE		23 STREE	T ADDRESS			
CITY-ST-ZIP	COCONUT GROVE FL 33133		2. 4 CITY	- \$1 - Z IP			
TITLE		☐ DELETE	3.1 HTLF			Change Addition	
name .			3.2 NAME			ļ	
STREET ADDRESS			3.3 STREE	E1 ADDRESS			
CITY-ST-ZIP			3.4 CITY				
TITLE		DELETE.	4.1 TITLE			Change Addition	
NAME			4.2 NAM)		ļ	
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	4.4 CITY- 5.1 TITLE			Change Addition	
NAME		grand Problems	5.2 NAME	l l		The street of the street of	
STREET ADDRESS			1	E1 ADDRESS			
CITY-ST-ZIP			5.4 CITY -				
TITLE		DELETE	6.1 TITLE			Change Addition	
NAME .			6.2 NAME				
STREET ADDRESS			63 STRE	ET ADDRESS			
CITY-ST-ZIP			6.4 CITY	ST-ZIP			

14. I do 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.

mountin-

MADEM & POSS

U/21/97 /050)761-844M