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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

## POCUMENT # P96000072191 (5)

FILED
May 15 1998 8:00am
Secretary of State

MGB C	COLLINS, INC.				1) Gâlli (Bâlà (Gal (148) 148) 14 114 1151 (Bâl
Principal Plac	e of Business	Mailing Address		T CODINGAL EID HALLO DINKI ADRIK DANK DAN	
1031 IVES DA	AIRY ROAD	2075 NE 164TH ST			
SUITE 125 #102				DO NOT WOITE	IN THE COACE
MIAMI FL 331	179-2538	N MIAMI BEACH FL 33162 US		3. Date Incorporated or Qualified	IN THIS SPACE
·		03		08/29/1996	
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 403	2 N. 29 AUE.	26 4032 N.	29 AVE	65-0717634	Not Applicable
Sulte, Apt.		Suite, Apt. #, etc.			CQ 75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Stat		City & State	<u></u>	6. Election Campaign Financing	\$5.00 May Be
	IWOOD, FL	28 HOLLYWOOD	, FL	Trust Fund Contribution	Added to Fees
Zip	Country	Zip 29 33020 30	Country	8. This corporation owes or has pai	
24 530			0[	Personal Property Tax due June	
	9. Name and Address of Current	Manustatan whaut	81 Name	10. Name and Address of New Reg	
RUGUVIN, LAWKENDE H ESU.				RBERTL HIRSCH BE	RG
			82 Street Addre	ess (P.O. Box Number Is Not Acceptab	e)
SUITE 125 MIAMI FL 33179-2538			R3	SHERIDAN ST.	· · · · · · · · · · · · · · · · · ·
į Wil	MMI FL 33 1/9-2536		3457	-E S	
	1	Λ	B4 City	YW000	FL   85   Zip Code /
11. Pursuant	to the provisions of Sections 07.0507	and 607,1508, Florida Statutes	the above-named corp	oration submits this statement for the pr	urpose of changing its registered
office or r	registered agent, or both, in the State	If Florida, Such change was aut	horized by the corporati	oration submits this statement for the pron's board of directors. I hereby accep	the appointment as registered
		L'ERBERT L	- Hosel	BEDO	4/6/08
SIGNATURE	Signature, typiod or printed have a registered agent		legistered Age it signature require	ed when reinstaling)	DATE
12.		· — · · · · · · · · · · · · · · · · · ·	13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	D	☐ DELETE	1.1 TITLE		L Change L Addition
NAME	ROGOVIN, LAWRENCE H		1.2 NAME		
STREET ADDRESS	1031 IVES DAIRY RD, STE 125	)	1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33179-2538	DELETE	1.4 CITY-SF-ZIP		Change Addition
TITLE	POLED MADYIM	□ nerete	2.1 TITLE		☐ Change ☐ Addition
NAME Street address	OSHER, MARTIN 1912 S OCEAN DR., #D15		2.2 NAME		
	HALLANDALE FL		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	INCOMPACE I C	☐ DELETE	2. 4 C/TY - ST - Z/P 3.1 T/TLE		Change Addition
NAME			3.2 NAME	•	
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME	·		5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		T Driete	5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADORESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	and the the total and an annual and with	a this filing does not qualify for t	6.4 CITY-ST-7IP	Section 119 07/3Vi) Elorida Statutos III	and the state of t

4. 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 eath, 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.

uhulaa

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