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

PROFIT
CORPORATION
ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

. Secretary of State DIVISION OF CORPORATIONS

## FILED Jan 29, 1999 8:00am Secretary of State

01-29-1999 90055 037 \*\*\*150.00

## DOCUMENT # P9700007478

1. Corporation	on Name	00/4/6			
MBG IN	C				
ļ	·				
Principal Plac	ce of Business	Mailing Address			OBINI BONN (BON BNON (OBB) (BN 1801
1310 GULF BLVD #303 1310 GULF BLVD #303					
INDIAN ROCKS BEACH FL 33785 INDIAN ROCKS BEACH FL 33785					
}	•			DO NOT WRITE IN 3. Date Incorporated or Qualifed	THIS SPACE
	•	•		01/21/1997	
L== '	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3474930	Not Applicable
Suite, Apt	. #, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required
City & Sta	te .	City & State		9 Floriton Commisso Financian	<del></del>
23		28	•	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year	
24	25		30	Personal Property Tax.	☐ Yes 【☑No
	9. Name and Address of Current			10. Name and Address of New Registe	red Agent
MCI	LAUGHLIN, DANIEL V		81 Name		
1310 GULF BLVD., #303			82 Street A	Address (P.O. Box Number is Not Acceptable)	-
INDI	IAN ROCKS BEACH FL 33785		83	- 通信が確認される場合。 原数で しゅつ あがける やっぱい かなります しょなまま かっち あいよっと を強いようない	2004 - 10, 45
}			65		<b>计划以外限图像</b>
. tree et me			84 City		FL 85 Zip Code
11, Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	s, the above-named o	corporation submits this statement for the purpos ration's board of directors. I hereby accept the a	e of changing its registered
agent, I a	am familiar with, and accept the obligati	ons of, Section 607.0505, Flor	ida Statutes.	ration's board of directors, Thereby accept the a	ppolitiment as registered
SIGNATURE				· · · · · · · · · · · · · · · · · · ·	
12,	Signature, typed or printed name of registered agent OFFICERS AND		Registered Agent signature re 13.	quired when reinstating) DAY ADDITIONS/CHANGES TO OFFICER	<del></del>
TITLE	P	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICER	Change Addition
NAME	MCLADGHUN, DANIEL V		1.2 NAME		
STREET ADDRESS	4040 01115 0115 4040		1.3 STREET ADDRESS		
CITY-ST-ZIP	INDIAN ROCKS BEACH FL 3378	35	1.4 CITY-ST-ZIP		<u> </u>
TITLE	VP	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	MCLAUGHUN, BARBARA A	•	2.2 NAME		,
STREET ADDRESS	. [		O A ATTOCKT ARRESCO		•
CITY-ST-ZIP	INDIAN ROCKS BEACH FL 3378		2.3 STREET ADDRESS		
NAME (S)	AMERICAN SHOWS IT		2.4 CITY-ST-ZIP	<u> </u>	Ci Change Ci Addition
	Market and the property of the second	DELETE	2.4 CITY-ST-ZIP 3.1 TITLE		☐ Change ☐ Addition
101	FOUL BUDGES A		2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME		☐ Change ☐ Addition
STREET ADDRESS	FOUL BUILD AND A A AMERICAN SERVICE OF THE SERVICE		2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS	Service and the service and th	☐ Change ☐ Addition
101			2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME		☐ Change ☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE		DELETE	2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP		<b>等混合的新生</b> 值
STREET ADDRESS CITY-ST-ZIP	AN ARREST GENOLOTE MATE	DELETE	2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE		<b>等混合的新生</b> 值
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14. 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 oath; that I am an officer or director of the corporation or the receiver or tractee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if change or or an attachment with an address, with all other like empowered.

SIGNATURE

WE REQUIRED

1/13/99

727-591-0566