2000 UNIFORM BUSINESS REPORT (UBR) FILED Mar 20, 2000 8:00 am Secretary of State DOCUMENT # **P97000053800** MADIO & COMPANY MGA, INC. 03-20-2000 90080 013 ***150.00 Principal Place of Business Mailing Address 3829 HOLLYWOOD BOULEVARD 3829 HOLLYWOOD BOULEVARD SUITE C SUITE C HOLLYWOOD FL 33021 HOLLYWOOD FL 33021-6729 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For City & State 65-0761684 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name MADIO, RALPH R Street Address (P.O. Box Number is Not Acceptable) 3829 HOLLYWOOD BOULEVARD SUITE C HOLLYWOOD FL 33021 Zip Code 8. 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 Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. \Box Trust Fund Contribution. Added to Fees (See criteria on back) Ø Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. **PSD** Addition CR2F034 (9/99 ☐ Change TITLE TITLE ☐ De'ete MADIO, RUSS R NAME NAME STREET ADDRESS 3829 HOLLYWOOD BOULEVARD, SUITE C STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33021 Addition Change ☐ Delete TITLE MADIO, GRACE A NAME STREET ADDRESS STREET ADDRESS 3829 HOLLYWOOD BOULEVARD, SUITE C CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33021 ☐ Change ☐ Addition ASDV TITI F ☐ Delete NAME MADIO, RALPH R NAME STREET ADDRESS STREET ADDRESS 3829 HOLLYWOOD BOULEVARD, SUITE C CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33021 ☐ Change ☐ Addition ☐ Delete TITLE TITLE MADIO, ROBERT R NAME NAME STREET ADDRESS STREET ADDRESS 3829 HOLLYWOOD BLVD., SUITE C CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33021 ☐ Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME

13. Thereby certify that the information supplied with this filling does not qualify 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 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 11 or Block 12 if changed, or on an attachined with an address, with all others were described by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachined with an address, with all others were described by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachined with an address, with all others were described by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachined with an address, with all others were described by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed in the statute of the st

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-15-00 954-966-2116

Date Daytime Phone *