## 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** 

DOCUMENT # P97000068195 (1)

MGV MARKETING, INC.

Principal Place of Business

.

Mailing Address

**FILED** Apr 30 1998 8:00am Secretary of State



7300 W CAMINO REAL. STE 231 BOCA RATON FL 33433			7300 W CAMINO REAL. STE 231 BOCA RATON FL 33433					
		BOCA HAIL				DO NOT WRITE IN THIS SPACE		
: 						3. Date Incorporated or Qualified		
						08/06/1997		
2. Principal Pl	ace of Business	2a. Mailing A	2a. Mailing Address			4. FEI Number	Applied For	
21		26	·			65-0786493	Not Applicable	
Sulte, Apt. #, etc.		, ————————————————————————————————————	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional	
22		27					Fee Required	
City & State		— <b>⊢</b> ¬ '	City & State			6. Election Campaign Financing	\$5.00 May Be	
Zip Country		28	Zip Country			Trust Fund Contribution	Added to Fees	
24	25	29		30		8. This corporation owes or has paid the	current year Intangible  Yes No	
9. Name and Address of Current Registered A						Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent		
					81 Name			
GELLER, MICHELLE 7300 W CAMINO REAL, STE 231				<u> </u>			<u></u>	
	CA RATON FL 33433	I			Street A	Iress (P.O. Box Number is Not Acceptable)		
	UM TATOM FL 33433			83				
							<del></del>	
				84	City	=	85 Zip Code	
11. Pursuant t	o the provisions of Sections 607.0	0502 and 607 1508, F	lorida Statutes,	the above	-named c	corporation submits this statement for the purpose	of changing its registered	
office or re	egistered agent, or both, in the St	ate of Florida. Such c	hange was auth	orized by	the corpo	pration's board of directors. I hereby accept the a	ppointment 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	l egent and title if applicable	(NOTE: Re	gistered Agen	nl signature re	equired when reinstating) DATE		
12.	OFFICERS.	AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE		[_	] DELETE	1.1 TITLE	J	PRESIDENT	Change Addition	
NAME				1.2 NAME		MICHELE GELLER	1100	
STREET ADDRESS				1.3 STREET A	ADDRESS	10378 BUDVA VENTU	RA DR.	
CITY-ST-ZIP		<u>-</u>	· · · · · · · · · · · · · · · · · · ·	1.4 CITY+ ST	-ZIP	BUCA RATON, E 334	9.8	
TITLE		Ĺ.	DELETE	2.1 TITLE	1		Change Addition	
NAME				2.2 NAME	- 1			
STREET ADDRESS				2.3 STREET A	1			
CITY-ST-ZIP			) DELETE	2.4 CITY-S1	T-ZIP			
TITLE		Ļ	DECEIE	3.1 TITLE			Change Addition	
NAME DEDICET ADOPTION			:	3.2 NAME			E	
STREET ADDRESS				3.3 STREET A				
CITY-ST-ZIP TITLE	<del></del>		DELETE	3.4. CITY - ST 4.1 TITLE	I - ZIP		Change Addition	
NAME		<u>L</u> _	JULLETE	4.1 IIILE 4.2 NAME			C change C Addition	
STREET ADDRESS				4.2 NAME 4.3 STREET A	MDDDree		l	
CITY-ST-ZIP								
TITLE			DELETE	4.4 CITY-ST 5.1 TITLE	- 217		Change Addition	
NAME			, , , , , , , , , , , , , , , , , , , ,	5.2 NAME	-			
STREET ADDRESS				5.3 STREET A	IDDBESS		i	
CITY-ST-ZIP				5.4 CITY - ST				
TITLE		T	DELETE	6.1 TITLE			Change Addition	
NAME				6.2 NAME				
STREET ADDRESS				6.3 STREET A	ADORESS			
CITY-ST-ZIP				6.4 CITY-ST			ĺ	
	artify that the information supplier	d with this filing dose	not gualify for th			In Section 119 07/3\(ii) Florida Statutes I further	Cortify that the information	

Indicated on this annual report or supplied with this filling does not quality for the scenario stated in Section 119.0 (3)(), Florida Statutes. Floride Certify that it is frue 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.