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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P97000068195

MGV MARKETING INC

1. Corporation Name

FILED Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90021 042 ***150.00

WOY WA	incrina, ino								
Principal Place	of Business	Mailing Address				, identên va istil (621) Sain estil 2511, 2511, 2	·/#> (4(8		
7300 W CAMINO REAL. STE 231 7300 W CAMINO REAL. STE BOCA RATON FL 33433 BOCA RATON FL 33433			: 231						
						DO NOT WRITE IN THIS	SPACE	<u> </u>	
						3. Date Incorporated or Qualifed 08/06/1997			_
2. Principal Pla	ace of Business	2a. Mailing Address 26 Suite, Apt. #, etc.				4. FEI Number 65-0786493 65,0785460	-		lied For Applicable
Suite, Apt. #	‡, etc.					5. Certificate of Status Desired \$8.75 Additional Fee Required			
City & State City & State						6. Election Campaign Financing	- \$5	.00-1	May Be
28						Trust Fund Contribution	Ad	ided to	Fees
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current year Into			
24	25	29	30			Personal Property Tax.	☑ Yes	<u> </u>	□No
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Registered	Agent		
0511	ED ANOLISILE			81	Name				
GELLER, MICHELLE 7300 W CAMINO REAL, STE 231				82	Street Addre	ess (P.O. Box Number is Not Acceptable)			
BOC	A RATON FL 33433	-		83					
				84	City	FL	85	Zip C	ode
12.		D DIRECTORS	13.	nt		ADDITIONS/CHANGES TO OFFICERS AN	D DIRI		RS IN 12
TITLE	Р	☐ DELETE	1,1 111	ΠE		•	∐ Ch	ange	☐ Addition
NAME	VINO, MICHELE G		1.2 NA				•		-
STREET ADDRESS CITY-ST-ZIP	10378 BUENA VENTURA DR BOCA RATON FL 33498		1,3 ST 1,4 CF		ADDRESS ZIP				
TITLE		☐ DELETE	2.1 TITLE				Change		☐ Addition
NAME			2.2 NA	ME	1	•			
STREET ADDRESS			2.3 ST	REET	ADDRESS				
CITY-ST-ZIP			2.4 C	ITY-S	T- ZIP				
TITLE		☐ DELETE	3,1 TII	TLE	1	and the second s	☐ Ch	ange	Addition
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TITLE		☐ DELETE	5.1 Tr	ΠE			- [(0)]	en ige	☐ Addition
NAME			FORM				_		Additio
STREET ADDRESS			5.2 N/	ME	***************************************				☐ Addition
CITY-\$T-ZIP			5.3 ST	ME REET	ADORESS		_		☐ Additio
			5.3 ST 5.4 CI	AME TREET TY-ST				22550	
TITLE		☐ DELETE	5.3 ST 5.4 CI 6.1 TI	AME TREET TY-ST TLE			Ch	ange	
		☐ DELETE	5.3 ST 5.4 CI 6.1 TI 6.2 N/	AME TREET TY-ST TLE AME				ange	Addition

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 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, with all other like empowered.

6.4 CITY-ST-ZIP

CITY-ST-ZIP

GELLER-VINO