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

DOCUMENT # **P97000068861**1. Corporation Name

MCDG INC.

MGDG, INC.

FILED May 03, 1999 8:00 am Secretary of State

05-03-1999 90035 007 ***150.00



Principal Place	of Business	Mailing Address						
7481 W OAKLAND PARK BLVD. STE 208 7481 W OAKLAND PARK BLV				208				
LAUDERHILL FL	33319	LAUDERHILL FL 33319			DO NOT WRITE IN	DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed			
					08/08/1997			
2. Principal Pl	ace of Business	2a. Mailing Address	,	****	4. FEI Number	Apr	olied For	
·		26			APPLIED FOR	Not	t Appticable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 A	I	
.2		27			C. Contracto en Ottata Boomea	Fee Red		
City & State		City & State			6. Election Campaign Financing	\$5.00		
:3		28			Trust Fund Contribution	Added to	o Fees	
Zip	Country	Zip	Cou	ntry	 This corporation owes the current ye Personal Property Tax. 		□No	
24	9. Name and Address of Cur	29	30		10. Name and Address of New Regist			
	9. Name and Address of Cur	rent Registered Agent		81 Name	10. Harris and Addicas of How Yough			
GOL	DBERG, DAVID							
	W OAKLAND PARK BLVD, S	STE 208		82 Street A	ddress (P.O. Box Number is Not Acceptable)			
	DERHILL FL 33319			83				
		•		<u> </u>			<u></u>	
				84 City		FL 85 Zip C	Joue	
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable. (N	IOTE: Registered	Agent signature rec		TE		
12.	OFFICERS	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICER		RS IN 12	
TITLE	Р	☐ DELETE	1.1 ΤΓ	TLE	,	☐ Change	☐ Addition	
NAME	GOLDBERG, DAVID R		1.2 N				}	
STREET ADORESS	7481 W. OAKLD PK BLVD	₹208		REET ADDRESS				
CITY-ST-ZIP	LAUDERHILL FL 33319	☐ DELETE		TY-ST-ZIP	1- SF	Change	Addition	
TITLE	VP	C) DETE 15	2.1 Ti		-	onango		
NAME	GREGG, MORT 600 SIERRA CIRCLE	•		REET ADDRESS				
STREET ADDRESS	CORAL GABLES FL 33156			ITY-ST-ZIP	. •			
CITY-ST-ZiP TITLE	COTAC GADEEO LE COTOC	☐ DELETE				Change	☐ Addition	
NAME			3.2 N	AME			1	
STREET ADDRESS			3.3 ST	REET ADDRESS				
CITY-ST-ZIP				ITY-ST-ZIP				
TITLE		☐ DELETE	4.1 Π	TLE		☐ Change	Addition	
NAME			4. 2 N			•	}	
STREET ADDRESS				FREET ADDRESS				
CITY-ST-ZIP		☐ DELETE		TY-ST-ZIP		Change	Addition	
TITLE		C Deceil	5.1 II					
NAME STREET ADDRESS	,			TREET ADDRESS	•			
CITY-ST-ZIP			5.4 C	TY-ST-ZIP	•			
TITLE		☐ DELETE	6.1 TI	TLE		Change	☐ Addition	
NAME	,		6.2 N	AME				
STREET ADDRESS			6.3 S	TREET ADDRESS				
			640	TV_ST_7/P				

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 supplied that it is true and accordate 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 trusted 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 of the corporation of the corporation

SIGNATURE:

EARD TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

4079

Daytime Phone #

.KZEU34 (11/90