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 #1. Corporation Name

P97000087704 (7)

MVP GROUP, INC.

Principal Place of Business		Mailing Address			iti indii 18dii 86ili 8181 1981	
2070 N.W. 79TH AVENUE Miami FL 33126		2070 N.W. 79TH AVENUE MIAMI FL 33126		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified 10/10/1997	
2. Principal	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26		65-0800434	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		***************************************	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Co	untry	8. This corporation owes or has paid the c	
24	25	29	30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New Registeres	i Agent
20	ARRERO, ARTURO 170 N.W. 79TH AVENUE IAMI FL 33128			82 Street Add 83 84 City	ress (P.O. Box Number is Not Acceptable)	85 Zip Code
agent I	am familiar with, and accept the obli	502 and 607.1508, Florida Sta to of Florida Such change wa gations of, Section 607.0505,	stutes, the a as authorize Florida Sta	bove-named corpora tutes.	poration submits this statement for the purpose tion's board of directors. I hereby accept the ap	
SIGNATURE	Elignature, typed or prented name of expisioned a	gout and title if apple, ablc (f	NOTE Register	ed Agent signature requi	red when reinstating) DATE	· · · · ·
12.	OFFICERS A	NO DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	T PD	☐ DELETE	1.11	ITLE		☐ Change ☐ Addition
NAME	MARRERO, ARTURO		1.2 8	IAME		
STREET ADDRESS	2021 NW 114TH AVENUE		1.3 5	TREET ADDRESS		
CITY-ST-ZIP	PEMBROKE PINES FL 33026	3	1.40	CITY-ST-ZIP		
TITLE	l VD	DELETE	211			Change Addition
NAME	GARCIA, VENACIO		221	IAME		•
STREET ADDRESS	l		1	TREET ADDRESS		
CITY-ST-ZIP	MIAMI SPRINGS FL 33166			CITY-ST-ZIP		
TITLE	SD	DELETE	3.1 1			Change Addition
NAME	GARCIA, PABLO R			IAME		
CIDECT ANNOCCE				TOUT ADDDEED		

CITY-ST-ZIP 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.

3.4. CITY-ST-ZIP

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE

NAME

HIALEAH FL 33012

FILED

Feb 27 1998 8:00am

Secretary of State

☐ Addition

Addition