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 # P97000103668 1. Corporation Name

M.C.G. ENTERPRISES, INC.

Principal Place	of Business	Mailing	g Address				110011007		•••••	
7100 GULF DR		71 00 GI	7100 GULF DRIVE							
SUITE 105			SUITE 105			DO NOT WRITE IN THIS SPACE				
HOLMES BEACH FL 34217			HOLMES BEACH FL 34217			DO NOT WRITE IN THIS SPACE				
US		US					3. Date Incorporated or Qualife	1		
							12/09/1997			
<u> </u>	lace of Business	2a. Mai	illing Address				4. FEI Number		 	oplied For
21		26					65-0801228			ot Applicable
Suite, Apt.	#, etc.	Suit	ite, Apt. #, etc.				5. Certifcate of Status Desired			Additional
22		27.		<u> </u>		<u> </u>			Fee R	equired
City & State)	City	y & State				6. Election Campaign Financing	' П		May Be
23		28					Trust Fund Contribution		Added	to Fees
Zip	Country	Zip	,	c	Country		8. This corporation owes the cu	rrent year In	tangible	
24	25	29		30			Personal Property Tax.		☐ Yes	⊠ (No
	9. Name and Address of Cur	rent Registere	d Agent				10. Name and Address of New	Registered	Agent	
					81	Name				
GROARK, MARTIN C					82	- C4	desar (D.O. Day Musebar in Not Accor	toblo)		
7100 GULF DRIVE, #105					82	Street Add	dress (P.O. Box Number is Not Accep	table)		
HOL	MES BEACH FL 34217				83					
	•			;	84	City		FI	85 Zip	Code
					- }		, , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , ,	-	rapistared
									changing its	
11. Pursuant	to the provisions of Sections 607.0	0502 and 607.1: ate of Florida S	508, Florida Stati luch change was	utes, the	above	-named cor	tion's board of directors. I hereby acc	ept the appoi	intment as re	gistered
11. Pursuant to office or reagent. I ar	to the provisions of Sections 607.0 egistered agent, or both, in the St m familiar with, and accept the ob	0502 and 607.1: ate of Florida. S ligations of, Sec	508, Florida Statu Such change was ation 607.0505, Fl	utes, the authoria lorida S	above zed by t tatutes.	-named cor the corporat	tion's board of directors. I hereby acc	ept the appoi	intment as re	egistered
agent. I ar	to the provisions of Sections 607. egistered agent, or both, in the Sta m familiar with, and accept the ob	0502 and 607.1 ate of Florida. S ligations of, Sec	508, Florida Stati Such change was ction 607.0505, Fi	utes, the authoria lorida S	e above zed by t tatutes.	-named cor the corporat	tion's board of directors. I hereby acc	ept the appoi	intment as re	gistered
agent. I ar SIGNATURE	m familiar with, and accept the ob Signature, typed or printed name of registered	ligations of, Sec	ction 607.0505, Fi	ionda S	tatutes.		ired when reinstating)	DATE		
agent. I ar SIGNATURE	m familiar with, and accept the ob Signature, typed or printed name of registered OFFICERS	ligations of, Sec	icable. (NOT	TE: Registe	tatutes. ered Agent			DATE	ND DIRECTO	ORS IN 12
agent. I ar	m familiar with, and accept the ob Signature, typed or printed name of registered	ligations of, Sec	ction 607.0505, Fi	TE: Registe	tatutes. ered Agent		ired when reinstating)	DATE		
agent. I an SIGNATURE	m familiar with, and accept the ob Signature, typed or printed name of registered OFFICERS	ligations of, Sec	icable. (NOT	TE: Registe	tatutes. ered Agent		ired when reinstating)	DATE	ND DIRECTO	ORS IN 12
agent. I all SIGNATURE 12.	Signature, typed or printed name of registered OFFICERS P GROARK, MARTIN C.	ligations of, Sec	icable. (NOT	TE: Registe	ered Agent 13. 1 TITLE 2 NAME		ired when reinstating)	DATE	ND DIRECTO	ORS IN 12
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered OFFICERS P GROARK, MARTIN C. 7100 GULF DRIVE, SUITE 1	ligations of, Sec	icable. (NOT	TE: Registe 1 1. 1.	ered Agent 13. 1 TITLE 2 NAME	t signature requi	ired when reinstating)	DATE	ND DIRECTO	ORS IN 12
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZP	Signature, typed or printed name of registered OFFICERS P GROARK, MARTIN C.	ligations of, Sec	icable. (NOT	TE: Registe 1 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	tatules. ored Agent 13. 1 TITLE 2 NAME 3 STREET	t signature requi	ired when reinstating)	DATE	ND DIRECTO	ORS IN 12
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered OFFICERS P GROARK, MARTIN C. 7100 GULF DRIVE, SUITE 1	ligations of, Sec	icable. (NO	TE: Registe 1 1. 1. 1. 1. 1. 2.	ared Agent 13. 1 TITLE 2 NAME 3 STREET 4 CITY-ST 1 TITLE	t signature requi	ired when reinstating)	DATE	ND DIRECTO	DRS IN 12
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered OFFICERS P GROARK, MARTIN C. 7100 GULF DRIVE, SUITE 1	ligations of, Sec	icable. (NO	TE: Registr 1. 1. 1. 1. 1. 2.	ered Agent 13. 1 TITLE 2 NAME 3 STREET 4 CITY-ST 1 TITLE 2 NAME	t signature requi	ired when reinstating)	DATE	ND DIRECTO	DRS IN 12
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered OFFICERS P GROARK, MARTIN C. 7100 GULF DRIVE, SUITE 1	ligations of, Sec	icable. (NO	TE: Registr 1 1 1 1 1 2 2 2 2	ered Agent 13. 1 TITLE 2 NAME 3 STREET 4 CITY-ST 1 TITLE 2 NAME 3 STREET	ADDRESS 7-ZIP ADDRESS	ired when reinstating)	DATE	ND DIRECTO	DRS IN 12
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered OFFICERS P GROARK, MARTIN C. 7100 GULF DRIVE, SUITE 1	ligations of, Sec	ction 607.0505, Fi	TE: Registe 1 1, 1, 1, 1, 2, 2, 2, 2, 2, 2, 2, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	ered Agent 13. 1 TITLE 2 NAME 3 STREET 4 CITY-ST 1 TITLE 2 NAME 3 STREET 4 CITY-SI 4 CITY-SI	ADDRESS 7-ZIP ADDRESS	ired when reinstating)	DATE	ND DIRECTO	DRS IN 12 Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered OFFICERS P GROARK, MARTIN C. 7100 GULF DRIVE, SUITE 1	ligations of, Sec	icable. (NO	TE: Registe 1 1. 1. 1. 1. 2. 2. 2. 3.	ored Agent 13. 1 TITLE 2 NAME 3 STREET 4 CITY-ST 1 TITLE 2 NAME 3 STREET 4 CITY-ST 1 TITLE	ADDRESS 7-ZIP ADDRESS	ired when reinstating)	DATE	ND DIRECTO	DRS IN 12
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered OFFICERS P GROARK, MARTIN C. 7100 GULF DRIVE, SUITE 1	ligations of, Sec	ction 607.0505, Fi	TE: Registe 1 1. 1. 1. 1. 2. 2. 2. 2. 3. 3.	ared Agent 13. 1 TITLE 2 NAME 3 STREET 4 CITY-ST 1 TITLE 2 NAME 3 STREET 4 CITY-ST 1 TITLE 4 CITY-ST 1 TITLE 2 NAME 3 STREET 4 CITY-ST	ADDRESS - ZIP - ADDRESS T- ZIP	ired when reinstating)	DATE	ND DIRECTO	DRS IN 12 Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered OFFICERS P GROARK, MARTIN C. 7100 GULF DRIVE, SUITE 1	ligations of, Sec	ction 607.0505, Fi	TE: Registe 1 1. 1. 1. 1. 2. 2. 2. 2. 3. 3.	ared Agent 13. 1 TITLE 2 NAME 3 STREET 4 CITY-ST 1 TITLE 2 NAME 3 STREET 4 CITY-ST 1 TITLE 4 CITY-ST 1 TITLE 2 NAME 3 STREET 4 CITY-ST	ADDRESS 7-ZIP ADDRESS	ired when reinstating)	DATE	ND DIRECTO	DRS IN 12 Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	Signature, typed or printed name of registered OFFICERS P GROARK, MARTIN C. 7100 GULF DRIVE, SUITE 1	ligations of, Sec	ction 607.0505, Fi	TE: Registration 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	ared Agent 13. 1 TITLE 2 NAME 3 STREET 4 CITY-ST 1 TITLE 2 NAME 3 STREET 4 CITY-ST 1 TITLE 4 CITY-ST 1 TITLE 2 NAME 3 STREET 4 CITY-ST	ADDRESS -ZIP -ADDRESS T-ZIP	ired when reinstating)	DATE	ND DIRECTO Change Change	DRS IN 12 Addition Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS "CITY-ST-ZIP" TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered OFFICERS P GROARK, MARTIN C. 7100 GULF DRIVE, SUITE 1	ligations of, Sec	ction 607.0505, Fi	TE: Registration 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	ratutes. ared Agent 13. 1 TITLE 2 NAME 3 STREET 4 CITY-ST 1 TITLE 2 NAME 3 STREET 4 CITY-ST 1 TITLE 2 NAME 3 STREET 4 CITY-ST 3 STREET 4 CITY-ST 3 STREET 3 STREET	ADDRESS -ZIP -ADDRESS T-ZIP	ired when reinstating)	DATE	ND DIRECTO	DRS IN 12 Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered OFFICERS P GROARK, MARTIN C. 7100 GULF DRIVE, SUITE 1	ligations of, Sec	ction 607.0505, Fi	TE: Registr 1 1, 1, 1, 1, 2, 2, 2, 2, 2, 2, 3, 3, 3, 4,	ratutes. 13. 1 TITLE 2 NAME 3 STREET 4 CITY-ST	ADDRESS -ZIP -ADDRESS T-ZIP	ired when reinstating)	DATE	ND DIRECTO Change Change	DRS IN 12 Addition Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered OFFICERS P GROARK, MARTIN C. 7100 GULF DRIVE, SUITE 1	ligations of, Sec	ction 607.0505, Fi	TE: Registration 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	ared Agent 13. 1 TITLE 2 NAME 3 STREET 4 CITY-ST 1 TITLE 2 NAME 3 STREET 4 CITY-ST 1 TITLE 2 NAME 3 STREET 4 CITY-ST 1 TITLE 2 NAME 3 STREET 4 CITY-SI 1 TITLE 2 NAME	ADDRESS -ZIP -ADDRESS T-ZIP	ired when reinstating)	DATE	ND DIRECTO Change Change	DRS IN 12 Addition Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered OFFICERS P GROARK, MARTIN C. 7100 GULF DRIVE, SUITE 1	ligations of, Sec	ction 607.0505, Fi	TE: Registration 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	Tatutes. Tatutes. Tatutes. Times and Agent Times and	ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS ADDRESS 1-ZIP	ired when reinstating)	DATE	ND DIRECTO Change Change	DRS IN 12 Addition Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered OFFICERS P GROARK, MARTIN C. 7100 GULF DRIVE, SUITE 1	ligations of, Sec	ction 607.0505, Fi	TE: Registration 11	Tatutes. Tatutes. Tatutes. Tatutes. Title Name STREET CITY-ST	ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS ADDRESS 1-ZIP	ired when reinstating)	DATE	ND DIRECTO Change Change	DRS IN 12 Addition Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered OFFICERS P GROARK, MARTIN C. 7100 GULF DRIVE, SUITE 1	ligations of, Sec	ction 607.0505, Fi	TE: Registration 11	Tatutes. Tatutes. Tatutes. Times and Agent Times and	ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS ADDRESS 1-ZIP	ired when reinstating)	DATE	ND DIRECTO Change Change Change	DRS IN 12 Addition Addition Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered OFFICERS P GROARK, MARTIN C. 7100 GULF DRIVE, SUITE 1	ligations of, Sec	ction 607.0505, Fi	TE: Registration 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	Tatutes. Tatutes. Tatutes. Tatutes. Title Name STREET CITY-ST TITLE	ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS ADDRESS 1-ZIP	ired when reinstating)	DATE	ND DIRECTO Change Change Change	DRS IN 12 Addition Addition Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered OFFICERS P GROARK, MARTIN C. 7100 GULF DRIVE, SUITE 1	ligations of, Sec	ction 607.0505, Fi	TE: Registration 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	Tatutes. Tatutes. Tatutes. Tatutes. Title Name STREET CITY-ST TITLE NAME STREET STREET CITY-ST STREET STREET STREET STREET	ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	ired when reinstating)	DATE	ND DIRECTO Change Change Change	DRS IN 12 Addition Addition Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered OFFICERS P GROARK, MARTIN C. 7100 GULF DRIVE, SUITE 1	ligations of, Sec	ction 607.0505, Fi	TE: Registration 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	Tatutes. Tatutes. Tatutes. Tatutes. Title Name STREET CITY-ST	ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	ired when reinstating)	DATE	ND DIRECTO Change Change Change Change	DRS IN 12 Addition Addition Addition Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered OFFICERS P GROARK, MARTIN C. 7100 GULF DRIVE, SUITE 1	ligations of, Sec	ction 607.0505, Fi	TE: Registration 1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	Tatutes. Tatutes. Tatutes. Tatutes. Title Name STREET CITY-ST TITLE NAME STREET STREET CITY-ST STREET STREET STREET STREET	ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	ired when reinstating)	DATE	ND DIRECTO Change Change Change	DRS IN 12 Addition Addition Addition

14. 1 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 a land other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

NAME

CITY-ST-ZIP

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90263 020 ***150.00