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

PROFIT CORPORATION ANNUAL REPORT

1999

DOCUMENT #

1. Corporation Name



P98000058867

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90167 017 ***150.00

MGB ME	EDIA GROUP, INC.					
Principal Place	e of Business	Mailing Address		— I FABRICON FIN LOIDE ENGLI DOUG ANDLI DOUG BOCK	<u>el ellet triet (aliet</u>	41 11 68 186
·		700 STARKEY RD. SUITE 1	422			
700 STARKE? RD. SUITE 1423 700 STARKEY RD. SUITE 1 LARGO FL 33771 LARGO FL 33771			423			
			DO NOT WRITE IN THIS SPACE			
				3. Date ir corporated or Qualifed		
				07/02/1998		
2. Principa P	lace of Business	2a. Mailing Address		4. FEI Number	App	pied For
21		26		59-3526045	. ——————	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 A	
22		27		J. 03.113.113 5. 213.13	Fee Re	quired
City & S at	e	City & State		6. Election Campaign Financing	\$5.00	
23		28		Trust Fund Contribution	Added to	c Fees
Zip	Country	Zip	Country	8. This corporation owes the current year	Intangible	l.
24	25		30	Personal Property Tax.		[2/1/0
	9. Name and Address of Curren	t Registered Agent	81 Name	10. Name and Address of New Registere	a Agent	
CDE	V D.44		81 Name			
GFEY, D M 700 Starkey Rd. Suite 1423			82 Street Add	ress (P.O. Box Number is Not Acceptable)		
LAN	GO FL 33771		83			1
			84 City		85 Zip C	Zide
				poration submits this statement for the purpose		
agent. I a	im familiar with, and accept the obligat	t and title if applicable. (NOTE:	da Statutes. Registered Agent signature require			
12.	·——	D DIRECTORS ☐ DELETE	13.	ADDITIC NS/CHANGES TO OFFICERS	Change	Addition
TITLE	PDT		1.1 TITLE		ondrige	
NAME	GREY, D M		12 NAME			
STREET ADDRES S		3	1.3 STREET ADDRESS			
CITY-ST-ZIP	LARGO FL 33771	☐ DELETE	1.4 CITY-ST-ZIP		Change	Addition
TITLE	SDV		2.1 TITLE		Onlinge	
NAME	BROOKS, ARTHUR J		2.2 NAME			
STREET ADDRES S		3	2.3 STREET ADDRESS			
CITY-ST-ZIP	LARGO FL 33771		2. 4 CITY-ST-ZIP			Addition
TITLE	DV	☐ DELETE	3.1 TITLE		Change	Addition
NAME	MEARA, ROBERT R		3.2 NAME			
STREET ADDRESS		3	3.3 STREET ADDRESS			
CITY-ST-ZIP	LARGO FL 33771	- Floriere	3.4. CITY-ST-ZIP		Change	☐ Addition
TITLE		☐ DELETE	4.1 TITLE		☐ Change	
NAME	Į		4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE		Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			ļ
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change	☐ Addition
NAME			6.2 NAME			
STREET ADDRESS)		6.3 STREET ADDRESS			١

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 a noual 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

SIGNATURE:

CITY-ST-ZIP