


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90369 002 ***150.00

DOCUMENT # S50107 1. Entity Name MG III, INC.					
Principal Place of Business 6300 NW 31ST AVE. FT LAUDERDALE, FL 33309			Mailing Address 6300 NW 31ST AVE. FT LAUDERDALE, FL 33309		
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country			
4. FEI Number 59-3070988				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent B&C CORPORATE SERVICES, INC. ONE BISCAYNE TOWER, 21ST FL 2 SOUTH BISCAYNE BLVD MIAMI, FL 33131			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WODA, JERRY W 6300 NW 31ST AVE. FT LAUDERDALE, FL 33309	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEE SUPPLEMENTAL SCHEDULE ATTACHED	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PERLYN, DONALD 6300 NW 31ST AVE. FT LAUDERDALE, FL 33309	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CCEO LORBER, HOWARD 1400 OLD COUNTRY RD. WESTBURY, NY 11590	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EV NORBITZ, WAYNE 1400 OLD COUNTRY RD. WESTBURY, NY 11590	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVF PALEY, CARL 1400 OLD COUNTRY RD. WESTBURY, NY 11590	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTAS DEVOS, RONALD 1400 OLD COUNTRY RD WESTBURY, NY 11590	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Donnell D. DeVos</i> Vice President 4/4/06 516-338-8500 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

ATTACHMENT
40074199

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ENTITY NAME: MG III, INC.

FEI # 59-3070988

SUPPLEMENTAL SCHEDULE

BLOCK 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

TITLE: D/C/CEO ADDITION
NAME: HOWARD LORBER
ADDRESS: 1400 OLD COUNTRY ROAD - SUITE 400
WESTBURY, NY 11590

TITLE: D/P/COO ADDITION
NAME: DONALD PERLYN
ADDRESS: 6300 NW 31st AVENUE
FT. LAUDERDALE, FL 33309

TITLE: D/EVP ADDITION
NAME: WAYNE NORBITZ
ADDRESS: 1400 OLD COUNTRY ROAD - SUITE 400
WESTBURY, NY 11590

TITLE: D/V/T/AS ADDITION
NAME: RONALD DEVOS
ADDRESS: 1400 OLD COUNTRY ROAD - SUITE 400
WESTBURY, NY 11590

TITLE: V/S ADDITION
NAME: JERRY WODA
ADDRESS: 6300 NW 31st AVENUE
FT. LAUDERDALE, FL 33309

TITLE: D/V/AS ADDITION
NAME: ERIC GATOFF
ADDRESS: 1400 OLD COUNTRY ROAD - SUITE 400
WESTBURY, NY 11590

TITLE: VP ADDITION
NAME: DONALD SCHEDLER
ADDRESS: 1400 OLD COUNTRY ROAD - SUITE 400
WESTBURY, NY 11590