

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 24, 2000 8:00 am
Secretary of State
 03-24-2000 90067 034 ***150.00

DOCUMENT # 559190

1. Entity Name

M.G.W. CORPORATION

Principal Place of Business

1063 NW 108 TERR
Miami
Florida 33168

Mailing Address

1063 Nw 108 TERRACE
MIAMI, Florida
33168

C0044417

2. Principal Place of Business

1063 NW 108 TERRACE

3. Mailing Address

1063 Nw 108 TERRACE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

MIAMI, Florida

City & State

MIAMI, Florida

4. FEJ Number

65-0276783

Applied For

Not Applicable

Zip

33168

Country

USA

Zip

33168

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HARRY G. HALL
1335-1341 NW 60th Street
Miami, FL

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<u>D</u>	<input type="checkbox"/> Delete
NAME	<u>Harry Hall</u>	
STREET ADDRESS	<u>1063 NW 108 TERRACE</u>	
CITY-ST-ZIP	<u>MIAMI, FL 33168</u>	
TITLE	<u>D</u>	<input type="checkbox"/> Delete
NAME	<u>GARTH HALL</u>	
STREET ADDRESS	<u>10838 NE 2ND COURT</u>	
CITY-ST-ZIP	<u>MIAMI, Florida</u>	
TITLE	<u>D</u>	<input type="checkbox"/> Delete
NAME	<u>WARREN A. HALL</u>	
STREET ADDRESS	<u>1063 NW 108th TERRACE</u>	
CITY-ST-ZIP	<u>MIAMI, FL 33168</u>	
TITLE		<input type="checkbox"/> Delete
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CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(Acct)

3/20/00

Date

Daytime Phone #

CR2E034 (9/99)