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**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra S. Mortman
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY -1 AM 9:05

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # V42543

(1)

1. Corporation Name

MEDIA GROUP INTERNATIONAL, INC.

Principal Place of Business

**18338 LARAUGH DR
NORTHVILLE MI 48167
US**

Mailing Address

**18338 LARAUGH DR
NORTHVILLE MI 48167
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

06/08/1992

3a. Date of Last Report

05/01/1994

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

24

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

4. FEI Number

65-0346536

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**PECORA, WILLIAM A.
5510 SOUTHWEST 70TH PLACE
MIAMI FL 33155**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE

D

NAME

FEHLAUER, FREDERICK G.

STREET ADDRESS

18338 LARAUGH DRIVE

CITY - ST - ZIP

NORTHVILLE MI

TITLE

D

NAME

HOFBAUER, THOMAS J.

STREET ADDRESS

29 VALLEY VIEW TERRACE

CITY - ST - ZIP

WAYNE NJ

TITLE

D

NAME

PECORA, WILLIAM A.

STREET ADDRESS

5510 S.W. 70TH PLACE

CITY - ST - ZIP

MIAMI FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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.

SIGNATURE:

Frederick G. Fehlauer **Frederick G. Fehlauer**

810 349 5451

SIGNATURE AND TYPED OR PRINTED NAME OF WORKING OFFICER OR DIRECTOR

4/9/95