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LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration

1. Effective Date of Registration August 1, 1999

2. House Identification Number _____

Senate Identification Number _____

REGISTRANT

3. Registrant name Multinational Business Services, Inc.

Address 11 Dupont Circle, NW, Suite 700

City Washington, State DC Zip 20036

4. Principal place of business (if different from line 3)

City Same. State/Zip (or Country) _____

5. Telephone number and contact name

() (202) 293-5886 Contact Jim Tozzi E-mail (optional) _____

6. General description of registrant's business or activities

Regulatory consultants.

CLIENT

A Lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should check the box labeled "Self" and proceed to line 10. Self

7. Client name Beverly Enterprises, Inc.

Address 5111 Rogers Ave., Suite 40-A

City Fort Smith State Arkansas Zip 72919-0155

8. Principal place of business (if different from line 7)

City Same. State/Zip (or Country) _____

9. General description of client's business or activities

Provider of nursing care.

LOBBYISTS

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any person listed in this section has served as a "covered executive branch official" or "covered legislative branch official" within two years of first acting as a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

Name	Covered Official Position (if applicable)
<u>Jim Tozzi</u>	<u>N/A</u>

Registrant Name Multinational Business Services, Inc. Client Name Beverly Enterprises, Inc.

LOBBYING ISSUES

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1, page 1.

GOV

12. Specific lobbying issues (current and anticipated)

Compliance with regulations of Department of Health and Human Services.

AFFILIATED ORGANIZATIONS

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the registrant in a semiannual period and in whole or in major part plans, supervises or controls the registrant's lobbying activities?

No -> Go to line 14.

Yes -> Complete the rest of this section for each entity matching the criteria above, then proceed to line 14.

Name	Address	Principal Place of Business (city and state or country)

FOREIGN ENTITIES

14. Is there any foreign entity that:

- a) holds at least 20% equitable ownership in the client or any organization identified on line 13; **OR**
- b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or subsidizes activities of the client or any organization identified on line 13; **OR**
- c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in the outcome of the lobbying activity?

No -> Sign and date the registration.

Yes -> Complete the rest of this section for each entity matching the criteria above, then sign and date the registration.

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	Ownership percentage in client

Signature [Signature] Date August 12, 1999

Printed Name and Title Jim Tozzi, President