

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90501 045 ***150.00

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02202004 Chg-P CR2E034 (10/03)

DOCUMENT # 236015 1. Entity Name M P & C FINANCIAL COMPANY					
Principal Place of Business ONE NORTH CLEMATIS ST., STE 200 WEST PALM BEACH, FL 33401 US			Mailing Address ONE NORTH CLEMATIS ST., STE 200 WEST PALM BEACH, FL 33401 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number 59-0901853			Applied For Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
TABERNILLA, ARMANDO A ONE NORTH CLEMATIS ST., STE 200 WEST PALM BEACH, FL 33401				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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 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	VT BLOMQUIST, ERIK ONE NORTH CLEMATIS ST., STE 200 WEST PALM BEACH, FL 33401	<input type="checkbox"/> Delete <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPAS CARSON, DONALD W. ONE NORTH CLEMATIS ST., STE 200 WEST PALM BEACH, FL 33401	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD TABERNILLA, ARMANDO A ONE NORTH CLEMATIS ST., STE 200 WEST PALM BEACH, FL 33401	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT VALDIVIESO, ROLANDO ONE NORTH CLEMATIS ST., STE 200 WEST PALM BEACH, FL 33401	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RECIO, ALBERTO S ONE NORTH CLEMATIS ST., STE 200 WEST PALM BEACH, FL 33401	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HERNANDEZ, OSCAR R ONE NORTH CLEMATIS ST., STE 200 WEST PALM BEACH, FL 33401	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: Armando A. Tabernilla, Vice President 3/10/04 561-655-6303					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					