

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2001 8:00 am
Secretary of State

05-02-2001 90104 011 ***150.00

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DOCUMENT # P00000033063

1. Entity Name

MC LIGHTING CONSULTANTS, INC.

Principal Place of Business
4100 NORTH POWERLINE ROAD, H5
POMPANO BEACH FL 33073

Mailing Address
4100 NORTH POWERLINE ROAD, H5
POMPANO BEACH FL 33073

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

65-1008772

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MURDOCH, ROBERT E
JOHNSON, ANSELMO, MURDOCH, BURKE & GEORGE
790 EAST BROWARD BLVD. SUITE 400
FORT LAUDERDALE FL 33301

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)

4/27/01
 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, 2001 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 Delete
 NAME **CIVIN, MICHEAL**
 STREET ADDRESS **4100 NORTH POWERLINE ROAD, H5**
 CITY-ST-ZIP **POMPANO BEACH FL 33073**

TITLE Change Addition
 NAME **PRESIDENT CIVIN, MICHAEL**
 STREET ADDRESS **4100 N POWERLINE, STE H-5**
 CITY-ST-ZIP **POMPANO BEACH, FL 33073**

TITLE Delete
 NAME **GESOWSKY, JAKE**
 STREET ADDRESS **2114 NORTHWEST 8TH STREET**
 CITY-ST-ZIP **BOCA RATON FL 33486**

TITLE Change Addition
 NAME **S. GERSOWSKY, JAKE**
 STREET ADDRESS **4100 N POWERLINE ROAD, STE H-5**
 CITY-ST-ZIP **POMPANO BEACH, FL 33073**

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
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 STREET ADDRESS
 CITY-ST-ZIP

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TITLE Change Addition
 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 on the report, or is 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

[Handwritten Signature]

4/27
 Date

J. GERSOWSKY
VICE PRESIDENT / CFO
954-984-9136

CR2E034 (10/00)