

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**FILED**  
**Apr 12, 1999 8:00 am**  
**Secretary of State**

04-12-1999 90003 019 \*\*\*150.00

PROFIT CORPORATION  
 ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # P94000090246**

1. Corporation Name  
**M.C. SMALL ENGINE REPAIR, INC.**



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
 5598 SHIRLEY ST  
 UNIT C  
 NAPLES FL 34109  
 US

Mailing Address  
 5598 SHIRLEY ST  
 UNIT C  
 NAPLES FL 34109  
 US

3. Date Incorporated or Qualified  
**12/12/1994**

4. FEI Number  
**65-0545232**

2. Principal Place of Business  
 21 **740 20th St SE**

2a. Mailing Address  
 26 **740 20th St SE**

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

23 **NAPLES, FL**

28 **NAPLES, FL**

6. Election Campaign Financing Trust Fund Contribution  **\$5.00** May Be Added to Fees

24 **34117** 25 **USA**

29 **34117** 30 **USA**

8. This corporation owes the current year Intangible Personal Property Tax.  Yes  No

9. Name and Address of Current Registered Agent

**CARRAU, MARCELO**  
 5598 SHIRLEY ST  
 UNIT C  
 NAPLES FL 34109

10. Name and Address of New Registered Agent

81 Name **Carrau, Marcelo**  
 82 Street Address (P.O. Box Number is Not Acceptable) **740 20th St SE**  
 83  
 84 City **NAPLES** 85 Zip Code **FL 34117**

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

(NOTE: Registered Agent signature required when reinstating)

**4/14/99**  
 DATE

12. OFFICERS AND DIRECTORS

TITLE	<b>PVST</b>	<input type="checkbox"/> DELETE
NAME	<b>CARRAU, MARCELLO M</b>	
STREET ADDRESS	<b>740 SE 20TH ST</b>	
CITY-ST-ZIP	<b>NAPLES FL 34117</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 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, with all other like empowered.

SIGNATURE: *[Signature]*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/14/99** 941-455-5340  
 Date Daytime Phone #

CR2E034 (1/1/98)