

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000110648

**Entity Name:** MESCO USA, INC

**Current Principal Place of Business:**

5030 OLD KINGS RD. NW  
JACKSONVILLE, FL 32254-1184

**Current Mailing Address:**

5030 OLD KINGS RD. NW  
JACKSONVILLE, FL 32254-1184

**FEI Number:** 54-1241610

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

HUX, WILLIAM F  
5030 OLD KINGS RD. NW  
JACKSONVILLE, FL 32254-1184 US

*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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PS  
Name HUX, AGRIFINA H  
Address 14410 POND PLACE DRIVE  
City-State-Zip: JACKSONVILLE FL 32223

Title V  
Name HUX, WILL F  
Address 14410 POND PLACE DRIVE  
City-State-Zip: JACKSONVILLE FL 32223

Title V  
Name BALMACEDA, GILBERT H  
Address 5030 OLD KINGS ROAD N  
City-State-Zip: JACKSONVILLE FL 32254

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** WILLIAM F. HUX

V

02/12/2015

Electronic Signature of Signing Officer/Director Detail

Date