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PROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # 562452

1. Corporation Name MCARED, INC.

Principal Place of Business C/O MCANY REALTY P.O. DRAWER C WOODBURY CT 06798 US

Mailing Address C/O MCANY REALTY P.O. DRAWER C WOODBURY CT 06798 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/20/1978

4. FEI Number 59-1808425 Applied For Not Applicable

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

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

8. This corporation owes the current year Intangible Personal Property Tax.

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

BENEDICT, SILVERMAN 3612 W. HILLSBORO BLVD DEERFIELD BEACH FL 33442

10. Name and Address of New Registered Agent

81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

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] DATE 3/1/99

12. OFFICERS AND DIRECTORS

Table with 5 rows for officers/directors. Includes fields for Title, Name, Street Address, City-ST-ZIP, and a DELETED checkbox.

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Table with 20 rows for additions/changes. Includes fields for Title, Name, Street Address, City-ST-ZIP, and checkboxes for Change and Addition.

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] DATE 3/1/99

CR2E034 (11/98)