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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 849365 (2)

MCI CONSTRUCTORS, INC.

Principal Place of Business	Mailing Address
14011 TELEGRAPH RD	14011 TELEGRAPH RD

FILED Jan 20 1998 8:00am Secretary of State



14011 TELEGR WOODBRIDGE VA 22192 WOODBRIDGE VA 22192 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/08/1981 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 51-0122532 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution 23 28 Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible Yes Yes 29 Personal Property Tax due June 30. 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) 82 PLANTATION FL 33324 83 84 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, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 1.1 TITLE Change Addition TITLE NAME MITCHELL, CLEMENT V. 1.2 NAME 5019 OBSERVER LN. STREET ADORESS 1.3 STREET ADDRESS WOODBRIDGE VA CITY - ST- ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE BAILEY, DONALD J 2.2 NAME 15409 WOODWAY DRIVE STREET ADDRESS 2.3 STREET ADDRESS TAMPA FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE 3.1 TITLE Change ___ Addition TITI F NAME DAVIS, BRUCE 3.2 NAME 14011 TELEGRAPH RD 3.3 STREET ADDRESS STREET ADDRESS WOODBRIDGE VA 3.4. CITY-ST-ZIP CITY - ST - ZIP DELETE Change ☐ Addition TITLE A 1 TITLE SCHADER, CHARLES R NAME 4. 2 NAME 99 JOHN ST STREET ADDRESS 4.3 STREET ADDRESS **NEW YORK NY** CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE MITCHELL. CLEMENT V. 5.2 NAME NAME 5019 OBSERVER LN. 5.3 STREET ADDRESS STREET ADDRESS. WOODBRIDGE VA 5.4 City-St-ZiP CITY-ST-ZIP Addition DELETE Change TITLE 6.1 TITLE 6.2 NAME **6.3 STREET ADDRESS** STREET ADDRESS CITY - ST - ZIP 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 of frestee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if change? or on an attackment with an address. 1/7/98 (703)494-8218