

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L55690** (6)
1. Corporation Name
MDC INVESTMENTS, INC.



Principal Place of Business: **3703 NW 82ND AVE. CORAL SPRINGS FL 33065**
Mailing Address: **9661 W. SAMPLE RD #181 CORAL SPRINGS FL 33065 US**

3. Date Incorporated or Qualified: **03/08/1990**
3a. Date of Last Report: **07/28/1995**

2. Principal Place of Business: 21
2a. Mailing Address: 26
22 Suite, Apt. #, etc.: 27
23 City & State: 28
24 Zip: 25 Country: 29

4. FEI Number: **65-1017796**
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 has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
**DECORTE, MICHAEL
3703 N.W. 82ND AVENUE
CORAL SPRINGS FL 33065**

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	PD <input type="checkbox"/> DELETE
NAME	DECORTE, MICHAEL
STREET ADDRESS	3703 NW 82ND AVENUE
CITY - ST - ZIP	FT. LAUDERDALE FL
TITLE	V <input type="checkbox"/> DELETE
NAME	MAVIS, BARCLAY
STREET ADDRESS	5621 SW 39TH ST
CITY - ST - ZIP	HOLLYWOOD FL
TITLE	S <input type="checkbox"/> DELETE
NAME	DECORTE, ANTOINETTE
STREET ADDRESS	3703 NW 82ND AVE
CITY - ST - ZIP	FT LAUDERDALE FL
TITLE	T <input type="checkbox"/> DELETE
NAME	MOSKAL, ROBERT
STREET ADDRESS	2841 N. OCEAN BLVD. #809
CITY - ST - ZIP	FT. LAUDERDALE FL
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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, or on an attachment with an address.

SIGNATURE: *[Signature]* **2-1-96** (305) 7536181
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: **MICHAEL DECORTE** Date: _____ Daytime Phone #: _____

CR2E034 (12/95)