

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000091072

1. Entity Name

MCVALL CORP.

FILED

Feb 15, 2001 8:00 am
Secretary of State

02-15-2001 90016 019 ***150.00

Principal Place of Business

1188 FALLS BOULEVARD
WESTON FL 33327

Mailing Address

1188 FALLS BOULEVARD
WESTON FL 33327



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1890 NW 82 AVE

3. Mailing Address

1188 FALLS BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE WB-1

City & State

MIAMI

City & State

WESTON FL

4. FEI Number

65-1044280

Applied For

Not Applicable

Zip

Country

Zip

Country

33126

DADE

FL 33327

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES FL 33134

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME MCCARTHY, NARDA L
STREET ADDRESS 1188 FALLS BOULEVARD
CITY-ST-ZIP WESTON FL 33327

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☐ Delete
NAME MCCARTHY, MICHAEL P
STREET ADDRESS 1188 FALLS BOULEVARD
CITY-ST-ZIP WESTON FL 33327

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☐ Delete
NAME MCCARTHY, PETER P
STREET ADDRESS 1188 FALLS BOULEVARD
CITY-ST-ZIP WESTON FL 33327

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☐ Delete
NAME MCCARTHY, MICHAEL E
STREET ADDRESS 1188 FALLS BOULEVARD
CITY-ST-ZIP WESTON FL 33327

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

V. President 02/19/2001 344-9011 (954)

Date

Daytime Phone #

First Union Check # 1031

CR2E034 (10/00)