

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 08, 2003 8:00 am**  
**Secretary of State**

09-08-2003 90138 015 \*\*\*150.00

0051775 AV

**DOCUMENT # P01000034281**

1. Entity Name

M.C. CONSULTANTS GROUP, INC.



Principal Place of Business

6725 S.W. 110 STREET

MIAMI FL 3315+

Mailing Address

6725 S.W. 110 STREET

MIAMI FL 3315+

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1104765

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75** Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

MARTINEZ, JUAN R

6725 S.W. 110 STREET

MIAMI FL 3315+

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

JUAN MARTINEZ, PRESIDENT

DATE

9/4/03

(NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$550.00**

**After September 10, 2003 Fee will be \$750.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution.

☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete  
NAME P  
STREET ADDRESS MARTINEZ, JUAN R  
CITY-ST-ZIP 6725 S.W. 110 STREET  
MIAMI FL 3315+

TITLE ☐ Delete  
NAME P  
STREET ADDRESS MARTINEZ, MARIA E  
CITY-ST-ZIP 6725 S.W. 110 STREET  
MIAMI FL 3315+

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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

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

12. 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 10 or Block 11 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

Date

Daytime Phone #

9/4/03 305-724-7604

CR2E034 (4/03)

Attachment

PB1000034281

80145036

September 3, 2003

Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

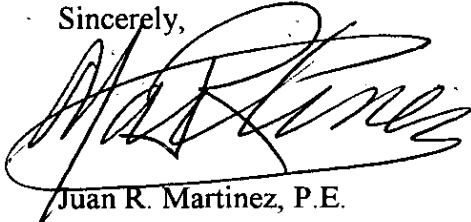
To Whom It May Concern:

I am hereby requesting that the late fee for the Uniform Business Report be waived for my corporation. This is the first time I have seen this document and the fee request it is requiring us to send.

I have attached the \$150.00 fee required under the normal filing deadline, and once again request your kind consideration for waving the late fee.

Feel free to call me should you have any questions. The best way to reach me is through my cell phone number 305-724-7604.

Sincerely,



Juan R. Martinez, P.E.  
President  
M.C. Consultants Group, Inc.  
6725 SW 110 Street  
Miami, FL 33156