04/26/2004 14:17 9543517760 SARTORI CPA PA

FILED
Apr 29, 2004 08:00 AM
Secretary of State

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000046469

1. Entity Name
MCI BROKERS, INC.

Principal Place of Business
8155 MYSTIC HARBOR CIRCLE
BOYNTON BEACH, FL 33436

Mailing Address
8155 MYSTIC HARBOR CIRCLE
BOYNTON BEACH, FL 33436

DO NOT WRITE IN THIS SPACE

04262004 No Chg-P CR2E034 (10/03)

4. FEI Number
01-0698676

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CALVACCA, MARIANNA
8155 MYSTIC HARBOR CIRCLE
BOYNTON BEACH, FL 33436

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

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	CALVACCA, MARIANNA
STREET ADDRESS	8155 MYSTIC HARBOR DR.
CITY-ST-ZIP	BOYNTON BEACH, FL 33436
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

04/30/04 150.00

DO NOT WRITE IN THIS SPACE

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: X Marianna Calvacca 4/26/04