

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000122707

FILED
Nov 01, 2004
Secretary of State

Entity Name: MCR STATEWIDE INVESTMENT CORP.

Current Principal Place of Business:

2727 HOLLYWOOD BLVD.
HOLLYWOOD, FL 33020

New Principal Place of Business:

Current Mailing Address:

2727 HOLLYWOOD BLVD.
HOLLYWOOD, FL 33020

New Mailing Address:

FEI Number: 06-1712639

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CHAVES, CLEMENCIA
2727 HOLLYWOOD BLVD.
HOLLYWOOD, FL 33020 US

Name and Address of New Registered Agent:

CHAVES, CLEMENCIA
13051 NW 1ST. STREET
APT. 209
PEMBROKE PINES, FL 33028 US

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: /CLEMENCIA CHAVES/

11/01/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CHAVES, CLEMENCIA
Address: 2727 HOLLYWOOD BLVD.
City-St-Zip: HOLLYWOOD, FL 33020

Title: S-T (X) Delete
Name: RODRIGUEZ, RICARDO
Address: 551 NW 135 TERRACE # 203
City-St-Zip: PEMBROKE PINES, FL 33028

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CHAVES, CLEMENCIA
Address: 13051 NW 1ST. STREET - APT. 209
City-St-Zip: PEMBROKE PINES, FL 33028

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: /CLEMENCIA CHAVES/

P

11/01/2004

Electronic Signature of Signing Officer or Director

Date