

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 16, 2007 8:00 am
Secretary of State

01-11-2007 90049 033 ***150.00

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1. Entity Name
MSTRCFT, INC.



Principal Place of Business
1200 W DR MLK JR BLVD
PLANT CITY, FL 33563

Mailing Address
P.O. DRAWER Y
PLANT CITY, FL 33566

66020380



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01042007

Chg-P

CR2E034 (12/06)

City & State

City & State

4. FEI Number

20-2610562

Applied For

Not Applicable

Zip

Country

Zip

Country

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

LASKOWITZ, JACK M CPA
1200 W DR MLK JR BLVD
PLANT CITY, FL 33563

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 the filer applicable.

(NOTE: Registered Agent signature required when changing)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
GORDON, MELVIN S
STREET ADDRESS
1200 W. DR. MLK, JR. BLVD
CITY- ST- ZIP
PLANT CITY, FL 33563

☐ Change ☐ Addition

TITLE
NAME
GORDON, RANDY S
STREET ADDRESS
1200 W. DR. MLK, JR. BLVD
CITY- ST- ZIP
PLANT CITY, FL 33563

☐ Change ☐ Addition

TITLE
NAME
WEINER, EUGENE L
STREET ADDRESS
1200 W. DR. MLK, JR. BLVD
CITY- ST- ZIP
PLANT CITY, FL 33563

☐ Change ☐ Addition

TITLE
NAME
GORDON, MARK H
STREET ADDRESS
1200 W. DR. MLK, JR. BLVD
CITY- ST- ZIP
PLANT CITY, FL 33563

☐ Change ☐ Addition

TITLE
NAME
SCHULIS, TRACY W
STREET ADDRESS
1200 W. DR. MLK, JR. BLVD
CITY- ST- ZIP
PLANT CITY, FL 33563

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 it made by an officer or director of the corporation or the receiver or trustee empowered to execute this report as provided in Chapter 601, 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:

Jack Laskowitz CFO
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Day/ Month/ Year

As per telephone conversation with
Barbara Puckett 7/10