

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 24, 2006 8:00 am**  
**Secretary of State**

04-24-2006 90401 036 \*\*\*150.00

**DOCUMENT # P05000077986**

1. Entity Name  
**MEC GROUP OF TAMPA BAY, INC.**



Principal Place of Business Mailing Address  
**733 OAK STREET, NE 733 OAK STREET, NE**  
**ST. PETERSBURG, FL 33701 US ST. PETERSBURG, FL 33701 US**

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

01042006 Chg-P CR2E034 (11/05)

4. FEI Number **20-3067327** Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY**  
**1201 HAYS STREET**  
**TALLAHASSEE, FL 32301**

7. Name and Address of New Registered Agent

Name **INCorp SERVICES, INC**

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

**18450 NE 2ND Ave**

City **Miami (MIAMI COUNTY)** **FL** Zip Code **33179**

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]* on behalf of Incorp Services, Inc.

4/19/06

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, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete  
NAME **MUSSMACHER, LORI GINA**  
STREET ADDRESS **733 OAK STREET, NE**  
CITY-ST-ZIP **ST. PETERSBURG, FL 33701**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
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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 **D** ☐ Change ☒ Addition  
NAME **MUSSMACHER, KEVIN A.**  
STREET ADDRESS **733 OAK ST NE**  
CITY-ST-ZIP **ST. PETERSBURG, FL 33701**

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

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

TITLE ☐ Change ☐ Addition  
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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 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 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]* **KEVIN A. MUSSMACHER, DIRECTOR**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-18-06

Date

(727) 452-8239

Daytime Phone #