2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 18, 2008 08:00 Al Secretary of State DOCUMENT # P06000126252 1. Entity Name MRC SUPPLY COMPANY Principal Place of Business Mailing Address 7049 SW 152 PLACE 7049 SW 152 PLACE MIAMI, FL 33193 MIAMI, FL 33193 No Chg-P CR2E034 (11/05) 01042008 DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 42-1714404 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 6. Name and Address of Current Registered Agent COLON, MARIANA L DO NOT WRITE 7049 SW 152 PLACE MIAMI, FL 33193 IN THIS SPACE 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 algorature reduced when reinstating) FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. U00000907367 TITLE 05/05/08-80035-015 158.75 COLON, MARIANA L NAME 7049 SW 152 PLACE STREET ADDRESS City-St-ZIP MIAMI, FL 33193 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITI F NAME STREET ADDRESS -DO-NOT-WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling 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 eath; 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 life empowered.

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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