FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90155 040 ***150.00

DOCUMENT # P36489

1. Corporation Name

C-MAC OF AMERICA, INC.

Principal Plac	ce of Business	Mailing Address							
VANGONIA PARK MANGONIA PARK									
1601 HILL AVE. 1601 HILL AVE.						OITE 111 TO 00 00 1	_		
N. PALM BCH, FL 33401 W. PALM BCH, FL 3:			40 1			DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualife	ed			
					12/02/1991				
Principal Place of Business 2a. Mailing Address					4. FEI Number		—— <u> </u>	lied For	
					65-0296170		Not	Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.			<u> </u>		5. Certifcate of Status Desired	□ \$8	3.75 A	dditional	
			. —		5. Certificate of Status Desired		Fee Rec	uired:	
City & State		City & State			6. Election Campaign Financin	g \$	5.00 №	Aay Be	
1		28			Trust Fund Contribution	" 🗆 🧚	dded to	Fees	
Zip	Country	Zip	Cou	intry	g. This corporation owes the cu	urrent vear Intangibl	e		
1	25	29	30	•	Personal Property Tax. Yes No				
	9. Name and Address of Curre		1201	Υ	10. Name and Address of Nev	Registered Agent	<u> </u>		
	5. Name and Address of Care	me registered rigens		81 Name					
LIOC	CE, DOMENICK R.			Wen					
1645 PALM BEACH LAKES BLVD., #1200				1 1	Address (P.O. Box Number is Not Acce	ptable)			
		7 1200		222	L Lakeview Ave				
W. I	PALM BCH. FL 33401			83 500	Te 1330				
	The first trace of the			84 City	7000	85	Zip C	ode	
				West	PAIN BEACH	┡┖	334	0 1	
11 Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida S	tatutes, the a	hove-named	cornoration submits this statement for the	ne purpose of chang	jing its r	egistered	
office or i	registered agent, or both, in the State	e of Florida. Such change w	as authorized	d by the coro	oration's board of directors, I hereby act	ept the appointmen	t as reg	istered	
agent. I a	am familiar with, and accept the oblig	ations of Section 607.0505	, Florida Stat	utes.	ledy sartory hink	1/22/24			
SIGNATURE	Authory 13	44 ANI	HOWY !	37K	Wendy Sactoby Link	DATE			
	Signature, typed or printed name of legistered ag	<u> </u>		Agent signature i	equired when reinstating) ADDITIONS/CHANGES TO (PECTOR		
12.		ND DIRECTORS ☐ DELET	13. Έ 1.1 ΤΙ		ADDITIONS/CHANGES TO C		hange	Addition	
	P.								
-	ANTHONY, BYK		1.2 N	-					
: АГДИТ,553	2 WYCLIFF RD.		1.3 \$	TREET ADDRESS					
·- \$7 ZP	PALM BCH GDNS. FL		1.4 C	ITY-ST-ZIP					
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	HOLMES, DAVID W.	/	2.2 N	AME	Gunther, SULANNE				
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	PALM BCH GDNS. FL	•	•	CITY-ST-ZIP	Wellington FL. 334	i4 "		•	
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	PROVENCHER, MICHAEL								
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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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.