

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 25, 2003 8:00 am
Secretary of State

04-25-2003 90243 025 ***150.00

DOCUMENT # P92000011178

Entity Name

M.C.W. AMERICA, INC.

11017125

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Principal Place of Business 1900 SOUTH TREASURE DRIVE		3. Mailing Address 1900 SOUTH TREASURE DRIVE		4. FEI Number 65-0909207	Applied For
Suite, Apt. #, etc. #5-A		Suite, Apt. #, etc. #5-A			Not Applicable
City & State N. BAY VILLAGE FL		City & State N. BAY VILLAGE FL		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
Zip 33141	Country USA	Zip 33141	Country USA		

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7. Name and Address of Current Registered Agent

Name ALBERTO ALEJANDRO TAVERNA
Street Address (P.O. Box Number is Not Acceptable) 2945 CENTER STREET
City MIAMI
State FL
Zip Code 33133

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 _____ DATE _____
Signature: Typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input checked="" type="checkbox"/>	January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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OFFICERS AND DIRECTORS

NAME	TITLE	STREET ADDRESS	CITY-STATE-ZIP
P/D ALBERTO ALEJANDRO TAVERNA 10060 NW 6TH LANE MIAMI FL, 33172			
VP/D DANIEL HORACIO MERCADO LOZANO AV. PABLO VI #7 28223 MADRID, ESPANA 28223			
T/D ROBERTO GAUDELLI CARRABETTA SINALOA #31 COLONIA ROMA MEXICO D.F. 06700 MEXICO DELGACION CUAU			

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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 report is supplemental, 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; the reporter of trust is empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment to this report, with all other filers as required.

SIGNATURE: 

CR2E034B (12/01)