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FILED

Apr 30 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P93000023999 (4)

1. Corporation Name  
MCBX, INC.



Principal Place of Business

Mailing Address

~~6800 MANATEE AVE., W.~~  
~~STE. B~~  
BRADENTON FL 34209  
US

~~6800 MANATEE AVE., W.~~  
~~STE. B~~  
BRADENTON FL 34209-2327  
US

3. Date Incorporated or Qualified 03/29/1993  
3a. Date of Last Report 05/01/1996

2. Principal Place of Business

2a. Mailing Address

21 5773 - MANATEE AVE

26 P. O. Box 14329

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State  
BRADENTON FL

27 City & State  
Palma Sola Branch  
BRADENTON FL

23 Zip  
34209

Country  
US

28 Zip  
34280

Country  
US

4. FEI Number 65-0399874  
Applied For  
Not Applicable

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

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CANELLI, MARCELLINE B  
~~812 - 59TH ST., NW~~ 316 - 60th St NW  
BRADENTON FL 34209

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature: typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstalling)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE S ☐ DELETE  
NAME CANELLI, ROBERT A  
STREET ADDRESS 812 - 59TH ST., NW  
CITY - ST - ZIP BRADENTON FL

1.1 TITLE SET ☒ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS 316 - 60th St NW  
1.4 CITY - ST - ZIP

TITLE P ☐ DELETE  
NAME CANELLI, MARCELLINE B  
STREET ADDRESS 812 - 59TH ST., NW  
CITY - ST - ZIP BRADENTON FL

2.1 TITLE ☒ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS 316 - 60th St NW  
2.4 CITY - ST - ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY - ST - ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP

14. I do 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.

SIGNATURE: *Robert A. Canelli* Secretary/Treas 4/16/97 941-795-1090  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)