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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT

1997

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

DOCUMENT # **P93000044948 (6)**

1. Corporation Name
M.C. INTERNATIONAL ENTERPRISES, INCORPORATED

Principal Place of Business	Mailing Address
135 VALENCIA DR. TALLAHASSEE FL 32304 US	135 VALENCIA DR. TALLAHASSEE FL 32304-3120 US

3. Date Incorporated or Qualified: 06/24/1993
3a. Date of Last Report: 05/01/1996

2. Principal Place of Business
21: 2408 Fred Smith Rd
22 Suite, Apt. #, etc.: N/A
23 City & State: Tallahassee, FL
24 Zip: 32303
25 Country: Leon

2a. Mailing Address
26: 2408 Fred Smith Rd
27 Suite, Apt. #, etc.: N/A
28 City & State: Tallahassee, FL
29 Zip: 32303
30 Country: Leon

4. FEI Number: 59-3202900 ☐ 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

MELNITZKE, JAMES J
135 VALENCIA DR.
TALLAHASSEE FL 32304

10. Name and Address of New Registered Agent

81 Name: MELNITZKE, JAMES J
82 Street Address (P.O. Box Number is Not Acceptable): 2408 FRED SMITH ROAD
83: 100102:15:4441---4
-05/02/97--01136--014
84 City: TALLAHASSEE ****165.00 FL 85 Zip Code: 32303

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: James J. Melnitzke - President — James J. Melnitzke — 4.30.97
Signature, type or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PVT	☐ DELETE	1.1 TITLE	PT	☒ Change ☐ Addition
NAME	MELNITZKE, JAMES J		1.2 NAME	MELNITZKE, JAMES J	
STREET ADDRESS	135 VALENCIA DRIVE		1.3 STREET ADDRESS	2408 FRED SMITH ROAD	
CITY-ST-ZIP	TALLAHASSEE FL 32304		1.4 CITY-ST-ZIP	TALLAHASSEE, FL 32303	
TITLE	D	☐ DELETE	2.1 TITLE	V/D	☒ Change ☐ Addition
NAME	MILLER, JOHN A		2.2 NAME	MILLER, JOHN A	
STREET ADDRESS	1817 W. CALL STREEET, #G-16		2.3 STREET ADDRESS	1817 W. CALL STREET, #G-16	
CITY-ST-ZIP	TALLAHASSEE FL 32304		2.4 CITY-ST-ZIP	TALLAHASSEE, FL 32304	
TITLE	C	☐ DELETE	3.1 TITLE	C	☒ Change ☐ Addition
NAME	TREMPER, WILLIAM		3.2 NAME	TREMPER, WILLIAM	
STREET ADDRESS	1817 W. CALL STREEET, #G-16		3.3 STREET ADDRESS	2959 Apalachee Parkway, #K-6	
CITY-ST-ZIP	TALLAHASSEE FL 32304		3.4 CITY-ST-ZIP	Tallahassee, FL 32301	
TITLE	D	☐ DELETE	4.1 TITLE	S	☒ Change ☐ Addition
NAME	ANDERSON, JEFF		4.2 NAME	ANDERSON, JEFF	
STREET ADDRESS	135 VALENCIA DR.		4.3 STREET ADDRESS	2408 FRED SMITH ROAD	
CITY-ST-ZIP	TALLAHASSEE FL 32304		4.4 CITY-ST-ZIP	TALLAHASSEE, FL 32303	
TITLE	D	☐ DELETE	5.1 TITLE	V	☒ Change ☐ Addition
NAME	MELNITZKE, GERALD		5.2 NAME	MELNITZKE, GERALD	
STREET ADDRESS	141 LAGOON RD., S.E.		5.3 STREET ADDRESS	141 LAGOON ROAD, S.E.	
CITY-ST-ZIP	WINTER HAVEN FL 33884		5.4 CITY-ST-ZIP	WINTER HAVEN, FL 33884	
TITLE	D	☐ DELETE	6.1 TITLE	D	☐ Change ☒ Addition
NAME	FARNELL, JEFF		6.2 NAME	Andy Parks	
STREET ADDRESS	4051 SONNET DRIVE		6.3 STREET ADDRESS	1300 N. Adams	
CITY-ST-ZIP	TALLAHASSEE FL 32303		6.4 CITY-ST-ZIP	Tallahassee, FL 32303	

CR2E034 (9/96)

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: James J. Melnitzke — James J. Melnitzke — 4.30.97 — (904) 893-7480 or 224-4377
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #