

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

8-25-96

PROFIT
CORPORATION
ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Morham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P93000079730 (6)

1. Corporation Name

M & C ENTERPRISES OF SEBRING, INC.

Principal Place of Business

204 S. RIDGEWOOD DR.
SEBRING FL 33870
US

Mailing Address

204 S. RIDGEWOOD DR
SEBRING FL 3387
US



2. Principal Place of Business

21 3025 Silver Star Rd

Suite, Apt. #, etc.

22 #107

23 Orlando, FL

Zip

24 32808

Country

25 Orange

2a. Mailing Address

26 3025 Silver Star Rd

Suite, Apt. #, etc.

27 #107

28 Orlando, FL

Zip

29 32808

Country

30 Orange

3. Date Incorporated or Qualified

11/18/1993

3a. Date of Last Report

02/10/1995

4. FEI Number

65-0440976

Applied For

Not Applicable

5. Certificate of Status Desired

☒ NO

\$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

RUSSELL T. CARR
204 S. RIDGEWOOD DR.
SEBRING FL 33870

10. Name and Address of New Registered Agent

81 Name Russell T. CARR
82 Street Address (P.O. Box Number is Not Acceptable)
3025 Silver Star Rd.
#107
83
84 City Orlando FL 85 Zip Code 32808

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 of person or persons authorized to register agent (if different from applicant)

Signature of Registered Agent (if different from registered agent)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME CARR, MICHAEL A
STREET ADDRESS 204 S. RIDGEWOOD DRIVE
CITY-ST-ZIP SEBRING FL 33870 ☒ DELETE

TITLE D
NAME CARR, RUSSELL T
STREET ADDRESS 204 S. RIDGEWOOD DRIVE
CITY-ST-ZIP SEBRING FL 33870 ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE D/T/S
2. NAME INGA K. CARR
3. STREET ADDRESS 3025 Silver Star Rd #107
4. CITY-ST-ZIP ORLANDO, FL 32808 ☐ Change ☒ Add on

2. TITLE D/P
2. NAME RUSSELL T. CARR
2.3 STREET ADDRESS 3025 Silver Star Rd #107
2.4 CITY-ST-ZIP Orlando, FL 32808 ☒ Change ☐ Addition

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

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

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

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

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Inga K. Carr (INGA K. CARR)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-15-96

407-293-2969

Date

Daytime Phone #

CR2E034 (12/95)