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PROFIT CORPORATION **ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000030561 (2)

MCR INDUSTRIES, INC.

Principal Place of Business

Mailing Address

FILED

Mar 18 1998 8:00am

Secretary of State

7246 55TH AVE. E P.O. BOX 996 **BRADENTON FL 34203** PALMETTO FL 34220-0996 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 04/20/1994 2. Principal Place of Business 2a. Mailing Address Applied For 4. FEI Number 21 26 65-0482567 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional X 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 28 Country Zip Country Zip This corporation owes or has paid the current year Intangible 29 Personal Property Tax due June 30. 25 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 MIXON, EUGENE A 11300 O'NEIL ROAD 82 Street Address (P.O. Box Number is Not Acceptable) PALMETTO FL 34220-0996 83 84 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 algorature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. Addition TITLE DELETE 1.1 TITLE Change NAME MIXON, EUGENE A 1.2 NAME 2908 26TH AVE. E. STREET ADDRESS 1.3 STREET ADDRESS **BRADENTON FL 34208** CITY-ST-71P 1.4 CITY - ST - ZIP Change Addition DELETE TITLE 2.1 TITLE MIXON, R. EMORY NAME 2.2 NAME 3134 47TH AVE. E. STREET ADDRESS 2.3 STREET ADDRESS **BRADENTON FL 34203** CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Addition TITI F 3.1 TITLE Change MIXON, SCOTT S NAME 3.2 NAME 2833 48TH WAY EAST STREET ADDRESS 3.3 STREET ADDRESS **BRADENTON FL 34203** CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Addition Change TITLE 4.1 TITLE MIXON, CAROLE P MAAR 4. 2 NAME STREET ADDRESS 2908 26TH AVE. E. 4.9 STREET ADDRESS **BRADENTON FL 34208** CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 5.1 TITLE Change Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 63 STREET ADDRESS

6.4 CITY-ST-ZIP 14. I hereby certify that the information supplied with this fiting 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:

**MANATURE AND TYPE OR PRINTED MANE OF SIGNAMO OFFICE DO PRINTED MANE OF SIGNATURE 2. MANATURE AND TYPE OR PRINTED MANE OF SIGNAMO OFFICE DO PRINTED MANE OFFICE DO PRINTED MAN