

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 29, 1999 8:00 am
Secretary of State

03-29-1999 90009 030 ***150.00

DOCUMENT # P94000030561

1. Corporation Name
MCR INDUSTRIES, INC.

Principal Place of Business

7246 55TH AVE. E.
BRADENTON FL 34203
US

Mailing Address

P.O. BOX 996
PALMETTO FL 34220-0996
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/20/1994

4. FEI Number

65-0482567

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax.

☐

Yes ☐ No

2. Principal Place of Business

21 4805 Buckeye Rd.

Suite, Apt. #, etc.

22 Palmetto, FL

City & State

23 34221 Manatee

Zip

Country

24 25 29 30

2a. Mailing Address

26 Suite, Apt. #, etc.

City & State

27 28

Zip

Country

9. Name and Address of Current Registered Agent

MIXON, EUGENE A
11300 O'NEIL ROAD
PALMETTO FL 34220-0996

10. Name and Address of New Registered Agent

81 Name

Mixon, Eugene A.

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

4805 Buckeye Rd.

83

Palmetto

84 City

FL

85 Zip Code

34221

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 Eugene A. Mixon

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3/24/99

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME MIXON, EUGENE A
STREET ADDRESS 2908 26TH AVE. E.
CITY-ST-ZIP BRADENTON FL 34208

TITLE ☐ DELETE

NAME MIXON, R. EMORY
STREET ADDRESS 3134 47TH AVE. E. 11300 O'NEIL Rd.
CITY-ST-ZIP BRADENTON FL 34203 Palmetto FL 34221

TITLE ☐ DELETE

NAME MIXON, SCOTT S
STREET ADDRESS 2833 48TH WAY EAST
CITY-ST-ZIP BRADENTON FL 34203

TITLE ☐ DELETE

NAME MIXON, CAROLE P
STREET ADDRESS 2908 26TH AVE. E.
CITY-ST-ZIP BRADENTON FL 34208

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE: Eugene A. Mixon

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/24/99

941-723-0504

Daytime Phone #

0482131

CR25034-111081