## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P94000072644

Entity Name: STATE'S M.C., INC.

FILED Apr 29, 2009 Secretary of State

| Current P                                                                               | rincipal Place                                       | of Business:                   | New Principal Place                         | of Business:                                 |  |
|-----------------------------------------------------------------------------------------|------------------------------------------------------|--------------------------------|---------------------------------------------|----------------------------------------------|--|
| 761 SW 13<br>POMPANO                                                                    | 3TH CT<br>O BEACH, FL                                | 33060                          |                                             |                                              |  |
| Current Mailing Address:                                                                |                                                      |                                | New Mailing Address:                        |                                              |  |
| 761 SW 13<br>POMPANO                                                                    | 3TH CT<br>O BEACH, FL                                | 33060                          |                                             |                                              |  |
| FEI Number                                                                              | : 65-0523314                                         | FEI Number Applied For()       | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )            |  |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent: |                                                      |                                |                                             |                                              |  |
|                                                                                         | HOLLIS<br>NDALFOOT BL<br>TON, FL 3342                |                                |                                             |                                              |  |
|                                                                                         | e named entity<br>e of Florida.                      | submits this statement for the | purpose of changing its registered          | d office or registered agent, or both,       |  |
| SIGNATUI                                                                                | RE:                                                  |                                |                                             |                                              |  |
| Electronic Signature of Registered Agent                                                |                                                      |                                | ent                                         | Date                                         |  |
| Election Car                                                                            | mpaign Financin                                      | g Trust Fund Contribution ( ). |                                             |                                              |  |
| OFFICERS AND DIRECTORS:                                                                 |                                                      |                                | ADDITIONS/CHANGE                            | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                                             | DP (<br>CLUTE, THOM<br>5116 NW 22NE<br>MARGATE, FL   | ) ST                           | Title:<br>Name:<br>Address:<br>City-St-Zip: | () Change () Addition                        |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                                             | DT (<br>HOLLIS, EISNE<br>22980 SANDAL<br>BOCA RATON, | FOOT BLVD                      | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                                             | MARGOLIS, RI<br>2230 NW 34TH                         |                                | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HOLLIS EISNER DT 04/29/2009