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Mailing Address 1301 WEST COPANS ROAD

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

FILED

Jan 22 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000021108 (2)

MPC BUSINESS COMMUNICATIONS, INC.

| 1301 WEST COPANS ROAD SUITE F-1 POMPANO BEACH FL 33064 US | | 1301 WEST COPANS ROAD SUITE F-1 POMPANO BEACH FL 33064-2221 US | | | | 3. Date Incorporated or Qualified 03/15/1995 | 3a. Date o | | eporl |
|--|---|---|--------------------|---|--|--|--------------------------------------|----------------------|------------------------|
| 2. Principal Pl | ace of Business | 2a. Mailing Address | | | | 4. FEI Number | | Ap | plied For |
| 21 | | 26 | | | | 65-0570243 | | | t Applicable |
| Suite, Apt 4 | #, etc | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired | □ \$ | | Additional |
| 22 | | 27 | | | | ree Required | | | |
| City & State | 3 | City & State | | | | 6. Election Campaign Financing \$5.00 May Be | | | |
| 23 | | 28 | | | | Trust Fund Contribution | | | |
| Z(p | Country | Zip | 1 | ountry | | 8. This corporation has liability for | | | . 199.032, |
| 24 | 9. Name and Address of Currel | 29 | 30 | | | Florida Statutes 10. Name and Address of New Reg | | | |
| wen | | ii riogistoreu Agont | ·· | 81 | Name | ID. Harro and Address of Not He | giotolou rigo | ··· | |
| | ISMAN, MARK | | | | | | | | |
| | WEST COPANS ROAD | | | 82 | Street Address (P.O. Box Number is Not Acceptable) | | | | |
| | EF-1 | | | 83 | | | | | |
| PUM | PANO BEACH FL 33064 | | | 00 | | | | | |
| | | | | 84 | City | | FL® | 5 Zip (| Code |
| 44 Durningst | to the provisions of Sections CO7 OF | 22 and CO7 1509 Etorido Statu | ton the | | p pamed o | orporation submits this statement for the p | | anaina il | e registered |
| office or re | egistered agent, or both, in the State m familiar with, and accopt the oblig | of Florida, Such change was | authori. | zed by | / the corpo | ration's board of directors. I hereby accep | ot the appoint | ment as | registered |
| SIGNATURE | Signature, typed or printed name of registered ag | ent and bitc if applicable (NO | TE: Regist | ered Age | ent signature re | quired when reinstating) | DATE | | |
| 12. | | D DIRECTORS | 1 | 3. | | ADDITIONS/CHANGES TO OFFIC | ERS AND DI | RECTOR | S IN 12 |
| TITLE | D | DELETE | 1.1 | 1 TIFLE | | | | Change | Addition |
| NAME | WEITSMAN, MARK | ~3 | 12 | 2 NAME | | | | | |
| STREET ADDRESS | 6820 BAYFRONT CIRCLE | | 13 | 3 STREET | ADDRESS | | | - | |
| CITY - \$1 - 7IP | MARGATE FL 33063 | | 14 | 4 CiTY - S | ST-ZIP | | | | |
| TITLE | D | DELETE | 2 | 1 TITLE | | | | Change | Addition |
| NAME | BEAUBIEN, MICHAEL | | 23 | 2 NAME | | | | | |
| STREET ADDRESS | 6802 BAYFRONT CIRCLE | | 23 | 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP | | | | | |
| CITY - ST - ZIP | MARGATE FL | | 2 | | | | | | |
| TITLE | DELETE DELETE | | | 1 TITLE | | | | Change | Addition |
| NAME | WEITSMAN, MARK | | 3.2 | 2 NAME | | 1905 A. C. C. | | | |
| STREET ADDRESS | 2049 DISCOVERY CIRCLE EA | ST | 3.3 | 3 STREET | ADDRESS | eg eg | | | |
| CITY - ST - ZIP | POMPANO BEACH FL 33064 | | 3 - | 4. CITY+9 | ST-ZIP | 4 | | | j |
| TITLE | | ☐ DELETE | | 1 TITLE | | | | Change | Addition |
| NAME | | | 4. | 2 NAME | | | | | |
| STREET ADORESS | | | 4.3 | 3 STREET | ADDRESS | | | | |
| CITY - ST - ZiP | | | | 4 CITY-S | i | | | | |
| TITLE | | DELETE | | 1 TITLE | | | | Change | ☐ Addition |
| NAMÉ | | | 5.3 | 2 NAME | | | | | |
| STREET ADDRESS | | | 5. | 3 STREET | T ADDRESS | | | | |
| CITY - ST - ZIP | | | | 4 CITY - S | | | | | |
| TITLE | | DELETE | | 1 TITLE | · · · · · · · · · · · · · · · · · · · | | | Change | Addition |
| MAME | | | 6. | 2 NAME | | | | | |
| STREET ADDRESS | | | | | ADDRESS | | | | |
| CiTY+SY+ZIP | | | | 4 CITY-S | | | | | |
| | by certify that the information supplie | ed with this filing does not qual | lify for t | he exe | mption sta | ited in Section 119.07(3)(i), Florida Statute | s. I further ce | rtily that | the |
| informatio Lam an of | n indicated on this annual report or flicer or director while durporation o | supplemental annual report is the requiver or trustee empor | true an wered t | d accu o exec | urate and to cute this re | ited in Section 119.07(3)(i), Florida Statute hat my signature shall have the same lega port as required by Chapter 607, Florida S | al effect as if r Statutes; and t | nade un that my i | der oath; that name |