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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #** P95000021108 (2)

MPC BUSINESS COMMUNICATIONS, INC.

Principal Place of Business Mailing Address 1301 WEST COPANS ROAD 1301 WEST COPANS ROAD DO NOT WRITE IN THIS SPACE POMPANO BEACH FL 33064 POMPANO BEACH FL 33064 3. Date Incorporated or Qualified <u>03/15/1995</u> 2, Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0570243 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible 24 29 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WEITSMAN, MARK 1301 WEST COPANS ROAD 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE F-1** 83 POMPANO BEACH FL 33064 84 City Pursuant to the provision and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered if Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered MREETOK-HARK SIGNATURE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE BEAUBIEN, MICHAEL NAME 1.2 NAME 6802 BAYFRONT CIRCLE 1.3 STREET ADDRESS STREET ADDRESS MARGATE FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 2.1 TITLE WEITSMAN, MARK 2.2 NAME NAME 2049 DISCOVERY CIRCLE EAST STREET ADDRESS 2 3 STREET ADDRESS POMPANO BEACH FL 33064 2 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST-ZIP CITY-ST-ZIP DELFTE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP Change DELE 1E 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS **53 STREET ADDRESS** CITY-ST-ZIP 5 4 CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE 6.2 NAME

6.3 STREET ADDRESS

SIGNATUR

officer or director of Block 12 or Block 13

14. Thereby certify that the information supplied with this film indicated on this annual roport or supplier tental annual roport.

STREET ADDRESS

ges not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in address.

**FILED** 

Apr 07 1998 8:00am

Secretary of State