23 98 B 5366 C 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 # P96000042016 (1)

MCR SYSTEMS, INC.

Principal Place of Business

Mailing Address

402 SOUTH CENTRAL AVENUE OVIEDO FL 32765 402 SOUTH CENTRAL AVENUE

FILED
Apr 23 1998 8:00am
Secretary of State



OVIEDO FL 32765		OVIEDO FL 32765			DO NOT IMPLIE IN THIS SPACE	DO NOT WRITE IN THIS SPACE		
					3. Date incorporated or Qualified	•		
					05/15/1996			
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number	Applied For		
26					59-338194 3	Not Applicable		
Suite, Apt. #, etc.		Suite, Apt #, etc.			- ¢2	.75 Additional		
22		27				ee Reguired		
City & State		City & State			6. Election Campaign Financing \$5	5.00 May Be		
23	28					dded to Fees		
Zip	Country	Zip	Coun	try	8. This corporation owes or has paid the current ye	er Intangible		
24	25	29	30		Personal Property Tax due June 30.			
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent			
HEI	NKEL, R L		8	11 Name	e			
201 WEST CANTON AVENUE #150			h.	2 Street	et Address (P.O. Box Number is Not Acceptable)			
MIW .	ITER PARK FL 32789		[`	- 0	A Address (1.0. Day Hombel 18 Hot Acceptable)			
			8	13				
			ļ.,	4 City				
				4 City	FL ⁸⁵	Zip Code		
office or re agent. I an	ot he provisions of Sections 607,0502 giste red agent, or both, in the State c n fam iliar with, and accept the obligat	of Florida. Such change v	vas authorized.	by the cor	ed corporation submits this statement for the purpose of chang orporation's board of directors. I hereby accept the appointme	ging its registered ant as registered		
SIGNATURE 3	lignature, typed or printed name of registered agent	it and title if applicable	(NOTE: Registered)	gent signatur	ore required when reinstating) DATE			
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIREC	CTORS IN 12		
TITLE	D	DELETE	1.1 DIL		President Chi	ange Addition		
NAME	Warble, ronald d		1.2 NAM	E	Richard Fowler			
STREET ADDRESS	402 SOUTH CENTRAL AVENU	JE	1.3 STRI	ET ADDRESS	l'alliant de la de la			
CITY-ST-ZIP	OVIEDO FL 32765	,	1.4 CITY	-ST-ZIP	Orlando, FL 32812	ارا		
TITLE	D	DELETE	2.1 TITL			ange 🖸 Addition		
NAME	AUGUSTINE, KERRY	•	2.2 NAM	E	wayne Leland			
STREET ADDRESS	402 SOUTH CENTRAL AVENU)E	2.3 STRE	E1 ADDRESS				
CITY-ST-ZIP	OVIEDO FL 32765	/	2. 4 CIT	'- ST- Z(P	WinterPark FL 32789			
TITLE	D	DELETE	3.1 TITLE			ange 🔲 Addition		
NAME	R ITTER, PATRICIA A		3.2 NAM	E				
STREET ADDRESS	402 SOUTH CENTRAL AVENUE	JE	3.3 S1RE	E1 ADDRESS	; -			
CITY-ST-ZIP	OVIEDO FL 32765		3.4. CITY	-ST-ZIP				
TITLE		DELETE			□ Cha	ange Addition		
NAME			4. 2 NAN	IE				
STREET ADDRESS	•		4.3 STRE	ET ADDRESS				
CITY-ST-ZIP			4.4 CITY	- S1 - 7(P				
TITLE		☐ DELETE			□ Ch;	ange		
NAME			5.2 NAM	F	_	• _		
STREET ADDRESS				et address				
CITY-ST-ZIP			5.4 CITY					
TITLE		DELETE		 	□ Cha	ange Addition		
NAME			6.2 NAM			7,00,000		
STREET ADDRESS				ET ADDRESS		ļ		
CITY-ST-ZIP						[
14. I hereby ce	rtify that the information supplied with	h this filing doos not gual	6.4 CITY ify for the exem	ntion state	 I ited in Section 119.07(3)(i), Florida Statutes. I further certify that 	at the information		
officer or d	n this annual report or supplemental .	larinual report is true and ver or trustee empowered	accurate and t	hat my sic	ignature shall have the same legal effect as if made under out as required by Chapter 607, Florida Statutes; and that my name	h-thallemen		