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

PROFIT
CORPORATION
ANNUAL REPORT
1998
DOCUMENT #



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700004613 (0) MAC-6 ENTERPRISES, INC.					
	ce of Business	Mailing Address			
1218 GRANTWOOD AVE CLEARWATER FL 34619		1316 GRANTWOOD AVE CLEARWATER FL 34619			in the state of th
					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
a filtrain In	New York				01/13/1997
2. Principal Place of Business		2a. Mailing Address			4. FEI Number Applied For Not Applied ble
Suite, Apt. #, etc.		Suite, Apt #, etc.			\$8.75 Additional
22		27			5. Certificate of Status Desired Fee Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be
Zip	Country	28]	Country		Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible
24	25	29	30		Personal Property Tax due June 30. Yes Yo
	9, Name and Address of Curre	ent Registered Agent		T No	10. Name and Address of New Registered Agent
	ACON, THOMAS M SR		81	Name	
	.16 G RANTWOOD AVE .EARWATER FL 34619		82	Street A	Address (P.O. Box Number is Not Acceptable)
	APARTITION E GYOTO		83		
			84	City	85 Zip Code
At Directort	to the provisions of Costions CO7.06	00 and 007 1100 fleride Old de	a the about	'	
Office or i	registered agent, or both, in the Statem familiar with, and accept the obli	te oi ⊬lorida. Such change was a	uthorized by	y the corp	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
SIGNATURE	arrinar with, and accept the con	gailons of, Spetion 607,0505, Fig	rida Statutes	8.	
	Signature, lyped or proteo name of registered a			ont signature r	required when reinstaling) DATE
12. TITLE	OFFICERS A	ND DIRECTORS DELETE	13.	· · ·	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 President
NAME			1.2 NAME		Thomas M. Malon Sr.
STREET ADDRESS			1.3 STREET	ADDRESS	Thomas M. Malon SR. 1316 Grantwood De.
CITY-ST-ZIP			1.4 CITY - S		Clearwater FC34619
TITLE NAME		∐ DELETE	2.1 TITLE		Change Addition
STREET ADDRESS	1		2.2 NAME 2.3 STREET	ADDRESS	
CITY-ST-ZIP			2. 4 CITY - S		
TITLE		DELETE 3.1 TITLE			☐ Change ☐ Addition
NAME CTDCCT ADDDCCC			3.2 NAMÉ		
STREET ADDRESS CITY-ST-ZIP			3.3 STREET		
TITLE		DELETE	34. CITY-ST-ZIP DELETE 4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4 3 STREET		
CITY-ST-ZIP TITLE		☐ DELETE	4 4 CITY - ST - ZIP		☐ Change ☐ Addition
NAME			5.1 THLE 5.2 NAME		Change Audition
STREET ADDRESS			5.3 STREET	ADDRESS	
CITY-ST-ZIP			5.4 CITY - S	T-ZIP	
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME Street address			6.2 NAME	ADDRESS	
SINCE AUGUNESS			6.3 STREET	AUDRESS	

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

OLONIATURE.

Thours M Waron SP 3/12/88 (813)804 d

FILED

May 11 1998 8:00am

Secretary of State