2a. Mailing Address

Suite, Apt. #, etc.

26

27

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

5519 NMiltory Fail

FILED Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90055 047 ***150.00

DO NOT WRITE IN THIS SPACE

Applied For Not Applicable

\$8.75 Additional

Fee Required

3. Date Incorporated or Qualifed

5. Certificate of Status Desired

	DOCL	JME	NT	#
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Principal Place of Business

2. Principal Place of Business

Suite, Apt. #, etc.

SIGNATURE:

21

1. Corporation Name

MC Resources, Inc.

5519 N.Military Trail

Boca Radon, FZ 33496

 							0.5.5	8
City & State		City & State				Election Campaign Financing Trust Fund Contribution		D May Be ito Fees
Zip	Country	Zip	Cot	intry		8. This corporation owes the current year	Intangible	
4	25	29	30			Personal Property Tax.	<u>√</u> Ye₃	□No
	. Name and Address of Current F	L-:		l		10. Name and Address of New Register	ed Agent	
				81	Name		_	
Meryl A. Charnow 5519 N. Military Trail #1016 Boca Radon, FL 33496			82 Street Address (P.O. Box Number is Not Acceptable)					
			83					
Boca	Radon, FL 331	196		84	City	F	L	Code
11. Pursuant to the	o acculators of Sections 507.0502	nd 607:1508; Florida: Florida, Such change	was authorized	d by '	the corpora	rporation submits this statement for the purpose tion's board of directors. I hereby accept the ap	of changing) cointment as i	is registered registered
SIGNATURE ***	ature. typod or printed name of registered agent &	od tille if applicable	(NOTE: Radistered	Aned	signature segu	lired when rainstelling) DATS		
12	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS	AND DIRECT	ORS IN 12
TITLE 1	Meryl A. Charnen	DELE	TE 1.1 T	πE			Change	Addition
NUME E	THE CHAPTER	1 tresiden	⅓ 12N	AME				
STREET ADDRESS	1 1/31 4 11700 4 1100C	()	~ 13 S	TREET	ADDRESS			
1-4	Floib Payor F	TL 33496		TY-\$1				
OITY-ST-JIP TE	oca vurily	☐ DELE					Change	e 🔲 Addition
NAME			2.2 N		Ì		. •	
STREET AODRESS			1		ADDRESS			
CITY-ST-ZIP				HTY-5	1			
TITLE							Change	e 🔲 Addition
NAME		•	32N	AME	-			
STREET ADDRESS			3.3 5	TREET	ADDRESS			
CITY-STIZIF					7:Z P* -			
rate		□ DELE					☐ Change	Addition
NAME			4.2 h	AME				
STREET ADDRESS			43S	TREET	ADDRESS			
CITY-ST-ZUP			4.4 C	TY- 51	-ZIP			
TIME		☐ DELE	TE 5.1 ft	TUE			<u></u> Сһалдо	e 🔲 Addition
NAME			5,2 N	AME	j			
STREET #ODRESS			5.3 S	REET	ADDRESS			
CITY-ST-ZIP			5.4 C	TY- \$1	r. ZIP			
rarre		DELE	1E 6.1T	TLE			Change	Addition
NAME			6.2 N	AME		•		
STREET ADDRESS			6.3 \$	TREET	ADDRESS			
CITY, 91, 2ID				TY-51		<u> </u>		
المناسب الماسية والماسية	fy that the information supplied with	this filing does not qua	lify for the exe	mpti	on stated in	Section 119.07(3)(I), Florida Statutes, I further	certify that the	information
indicated on t	this annual report or supplemental at	nnual report is true and r or trustee empowers	o accurate and of to execute t	i tnat his re	: my signati eport as rec	ire shall have the same legal effect as if made u juired by Chapter 607, Florida Statutes; and tha	nuel Dani. Ula	r: territeur
Block 12 or B	lock 13 if changed, or on an attachn	ient with an address, t	wiru alı Cıvat III	√⇔ ⊕ L	промегей.	/ 1		