## 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 1 DIVISION OF CORPORATIONS

**DOCUMENT #** P97000062283 (1)

-WEG HOLDING COMPANY MCR Technologies, Inc.

Country

9. Name and Address of Current Registered Agent

25

HEINKEL, R. LAWRENCE 201 W. CANTON AVE., STE. 250

WINTER PARK FL 32789

Principal Place of Business

2. Principal Place of Business

402 S. CENTRAL AVE. OVIEDO FL 32765

Suite, Apt. #, etc.

City & State

Zip

STREET ADDRESS

CITY-ST-ZIP

21

22

23

24

Mailing Address

2a. Mailing Address

City & State

27

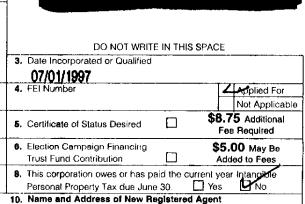
28

29

Suite, Apt. #, etc.

402 S. CENTRAL AVE. OVIEDO FL 32765

FILED May 21 1998 8:00am Secretary of State



82

63

**84** City

Country

Name

Street Address (P.O. Box Number is Not Acceptable)

30

11. Pursuant to the provisions of Sections 607.0502 and 607.0508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE Signature, typed or protect rank of registered agent and total applicable (NOTL Registered Agent signature required when reinstating)  DATE						
12. OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS		3S IN 12	
TITLE	<u>D</u>	DELFTE	1.1 TILLE	President.	Change	Midition
NAME	WARBLE, RONALD D		1.2 NAME	Richard Fowler	·	
STREET ADDRESS	402 S. CENTRAL AVE.		1.3 STREET ADDRESS	3315 Heathgate Court		
CITY-ST-ZIP	OVIEDO FL 32765		1.4 CITY - ST - ZIP	orlando, FL 32812		ار
TITLE		DELETE	2.1 TITLE	VP, Secretary Freasurer	☐ Change	Addition
NAME			2.2 NAME	whune le la od		.
STREET ADDRESS			2.3 STREET ADDRESS	3040 Temple Trail		
CITY-ST-ZIP	<u> </u>		2. 4 City-St-ZIP	Winter Park, FL 32789		
TITLE	-	☐ DELETE	3 1 1HLE	,	Change	Addition
NAME			3.2 NAME			
STREET ADDRESS	·		33 STREET ADDRESS			ĺ
CITY-ST-ZIP			3 4. C/TY - ST - ZIP			
TITLE		☐ DELETE	4 1 TITLE		Change	☐ Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			į
CITY-ST-ZIP			4.4 C(TY - S1 - Z(P			
TILE		☐ DELETE	5.1 TITL€		☐ Change	Addition
NAME			5.2 NAME		_	よS .l
STREET ADDRESS			5.3 STREET ADDRESS			621
CITY-ST-ZIP			5.4 CITY - ST - ZIP			2000
TITLE		DELETE	6.1 TITEF	0000025324		Addition
NAME			6.2 NAME	-09/22/9901004	.041	

14. Thereby 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 is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 13 if changed, or on an attachment with an address.

6.4 CITY - ST - 7(P)

6.3 STREET ADDRESS

\*\*\*150.00