## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # **P97000065564**

MC CONSTRUCTION GROUP, INC.

Principal Place of Business Mailing Address 1775 NW 79TH AVE 1775 NW 79TH AVE 702324 FL 33126 MIAMI FL 33126-1112 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0770266 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CAPPELLETI, JAVIER E Street Address (P.O. Box Number is Not Acceptable) 1775 NW 79TH AVE MIAMI FL 33126 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 4BGRETARY TITLE Addition ☐ Delete LONDOS, WILLIAM R MARAF KENNETH Mc CAUL STREET ADDRESS 13489 S.W. 151ST TERRACE 1775 NW 79TH AVE. CITY-ST-ZIP MIAMI FL 33186 416 W. FL. 33126 ☐ Change ☐ Addition ☐ Delete TITLE

TITLE MAME STREET ADDRESS CITY-ST-7IP CAPPELLETI, JAVIER E NAME NAME STREET ADDRESS STREET ADDRESS 14510 S.W. 66TH AVENUE CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33186 ☐ Change TITLE Delete TITLE Addition LONDOS, TED NAME NAME STREET ADDRESS 1775 NW 79TH AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33126** TITLE ☐ Delete Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITI F NAME NAME STREET ADDRESS STREET ADDRESS

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, principle of the proposered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-7IP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Javien E. COD

**FILED** 

Jan 21, 2000 8:00 am Secretary of State

01-21-2000 90122 027 \*\*\*150.00

CR2E034 (9/99)