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**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P97000073300 1. Corporation Name

## **FILED** Mar 17, 1999 8:00 am Secretary of State

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MCA INV	ESTMENT INC.								
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Principal Place	n of Rusiness	Mailing Address					OOHI BAKA OOKI	<b>iband</b> ill <b>in</b> ili	
Principal Place of Business Mailing Address 601 BRICKELL KEY DR.: SUITE 501 601 BRICKELL KEY DR.: SL			SHITE SM			·			
MIAMI FL 33131-2651 MIAMI FL 33131-2651									
,						DO NOT WE		SPACE	
						3. Date Incorporated or Qualife	a		
0 D-iii D	lace of Business	2a Mailing Address				08/22/1997 4. FEI Number			pplied For
_	lace of business	26				65-0778087		}	lot Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.			-				Additional
22		27				5. Certifcate of Status Desired		Fee F	Required
City & State	9	City & State				6. Election Campaign Financing		\$5.00	May Be
23	·	28				Trust Fund Contribution		Added	l to Fees
Zip	Country	Zip	Cou	intry		8. This corporation owes the cu	rrent year In		اید
24	25	29	30			Personal Property Tax.	Bt-1 1	Yes	D No
	9. Name and Address of Current	Registered Agent		04	Na	10. Name and Address of New	Kegistered	Agent	• `
0.17	IEDDEZ DENALDY I			81	Name			<u> </u>	
GUTIERREZ, RENALDY J 601 BRICKELL KEY DR., SUITE 501				82 Street Address (P.O. Box Number is Not Acceptable)					
	WI FL 33131-2651			83					
MIAN	WI FL 33131-2031			03				_	ļ
				84	City		FL	85 Zir	Code
								<b>-</b>	
<del>_</del>				h 21/2		poration cultmits this statement for th	A PURDOSA O	channing i	s registered
11. Pursuant office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508, Florida State of Florida. Such change was	tutes, the a	bove by t	-named corp	poration submits this statement for thion's board of directors. I hereby acc	e purpose o	f changing it intment as i	ts registered registered
11. Pursuant office or ragent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligation	t and 607.1508, Florida Star of Florida. Such change was ons of, Section 607.0505, F	tutes, the a authorized lorida Stat	bove by tutes.	-named corp	poration submits this statement for th ion's board of directors. I hereby acc	e purpose o ept the appo	f changing if intment as i	ts registered registered
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signature	Signature, typed or printed name of registered agent OFFICERS AND	and title if applicable. (NCD DIRECTORS	TE: Registered	Agent	e-named corp the corporati	ed when reinstating)	DATE	ND DIRECT	ORS IN 12
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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 trip 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 employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if phanged, or on an attachment with an address, with all other like empowered.

SIGNATURE: