

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000090848

Entity Name: MCW CORPORATION

FILED
Apr 13, 2006
Secretary of State

Current Principal Place of Business:

870 NARRAGANSETT LN.
KEY LARGO, FL 33037

New Principal Place of Business:

Current Mailing Address:

870 NARRAGANSETT LN.
KEY LARGO, FL 33037

New Mailing Address:

FEI Number: 65-0790152

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WASSER, MARK
870 NARRAGANSETT LN
KEY LARGO, FL 33037 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: WASSER, MARK C
Address: 5572 PINETREE DRIVE
City-St-Zip: MIAMI, FL 33140

Title: VD () Delete
Name: WASSER, SOFY
Address: 5572 PINETREE DRIVE
City-St-Zip: MIAMI, FL 33140

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: WASSER, MARK C
Address: 870 NARRAGANSETT LN.
City-St-Zip: KEY LARGO, FL 33037

Title: VD (X) Change () Addition
Name: WASSER, SOFY
Address: 870 NARRAGANSETT LN
City-St-Zip: KEY LARGO, FL 33037

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK WASSER

PRES

04/13/2006

Electronic Signature of Signing Officer or Director

_____ Date