

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000012943

1. Entity Name  
MEC ENTERPRISES OF CENTRAL FL INC.

**FILED**  
**May 13, 2002 8:00 am**  
**Secretary of State**

05-13-2002 90185 039 \*\*\*150.00

Principal Place of Business  
606 N PINE STREET  
#UP  
NEW SMYRNA BEACH FL 32169

Mailing Address  
606 N PINE STREET  
#UP  
NEW SMYRNA BEACH FL 32169

2. Principal Place of Business  
3125 YULE TREE  
Suite, Apt. #, etc.

3. Mailing Address  
P O BOX 771  
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State  
EDGEWATER FL

City & State  
NEW SMYRNA BEACH FL

4. FEI Number 59-3491370

Applied For  
Not Applicable

Zip  
32141

Country  
VOLUSIA

Zip  
32170

Country  
VOLUSIA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

## 6. Name and Address of Current Registered Agent

COOK, MICHAEL E  
606 NORTH PINE STREET  
NEW SMYRNA BEACH FL 32169

## 7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
3125 YULE TREE  
City EDgewater FL Zip Code 32141

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

## 11. OFFICERS AND DIRECTORS

TITLE P  
NAME COOK, MICHAEL E  
STREET ADDRESS 606 N PINE STREET #UP  
CITY-ST-ZIP NEW SMYRNA BEACH FL 32169 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PVST  
NAME COOK, MICHAEL E ☒ Change ☐ Addition  
STREET ADDRESS 3125 YULE TREE  
CITY-ST-ZIP EDgewater FL 32141

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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 with all other like empowered.

SIGNATURE: Michael E Cook MICHAEL E COOK (386)  
PRESIDENT 04-26-02 428-0262  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)