

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED  
Jul 15, 1999 8:00 am  
Secretary of State  
07-15-1999 90007 044 \*\*\*150.00

PROFIT CORPORATION  
ANNUAL REPORT  
1999

FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P98000035009 ✓  
1. Corporation Name  
MCB FINANCIAL, INC.

Principal Place of Business  
1090 E. JEFFREY ST.  
BOCA RATON FL 33487  
600 South Federal Hwy  
Suite 221  
Deerfield Beach, FL 33441

Mailing Address  
1090 E. JEFFREY ST.  
BOCA RATON FL 33487  
Same

2. Principal Place of Business  
21 600 South Federal Hwy  
Suite, Apt. #, etc.  
22 Suite 221  
City & State  
23 Deerfield Beach, FL  
Zip  
24 33441 Country  
25 USA

2a. Mailing Address  
26 600 S. Federal Hwy.  
Suite, Apt. #, etc.  
27 Suite 221  
City & State  
28 Deerfield Beach, FL  
Zip  
29 33441 Country  
30 USA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
04/13/1998

4. FEI Number  
65-0825242 Applied For  
Not Applicable

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

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

8. This corporation owes the current year Intangible Personal Property. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent  
BELKIN, MATTHEW  
1090 E. JEFFREY ST.  
BOCA RATON FL 33487

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
1090 East JEFFERY ST.  
83  
84 City  
FL 85 Zip Code

11. Pursuant to the provisions of sections 607.0502 and 607.1508, 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
NAME	BELKIN, MATHEW	1.2 NAME	
STREET ADDRESS	1090 E. JEFFREY ST. Jeffery	1.3 STREET ADDRESS	1090 East Jeffery Street
CITY-ST-ZIP	BOCA RATON FL 33487	1.4 CITY-ST-ZIP	
TITLE		2.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [Signature] 7-7-99 954-725-240

CR2E034 (5/99)

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588760-90007  
-44

To whom it may concern:

I never received a first notice for this filing. Upon receiving the second notice, I called the Division of Corporations. The person I spoke with said to write a note stating that I never received this notice and to send in a check for the required \$150. This is the notice and my check is attached. Also, please note my address change:

MCB Financial, Inc.  
600 South Federal Highway  
Suite 221  
Deerfield Beach, FL 33441  
(954)725-2400

Yours truly,



Matthew C. Belkin  
President