## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## FILED Apr 29, 2004 08:00 AM Secretary of State

4-19-04 305-819-0301 Date Daytene Pione \*

ANNOAL REPORT					Sagratary of State	
DOCUMENT # P99000059151  1. Entity Name MCSERVICES & MANAGEMENT, INC.			Secretary of State			
•	te of Business AVENUE #260 . 33012	Mailing Address 4759 PALM AVENUE #260 HIALEAH, FL 33012				
			·			
E	O NOT WRIT	E IN THIS SPA	CE	03162004 No Chg-P CR2E034 (10/03)  4. FEI Number Applied For 65-0974997 Not Applicable  5. Certificate of Status Desired		
		<u></u>		3. Ceranical	Fee Required	
6. Name and Address of Current Registered Agent  MELIANS, DIEGO 13280 SW 98TH STREET MIAMI, FL 33186			DO NOT WRITE IN THIS SPACE			
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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  Signature, typoid or printed name of registered agent and site if applicable. (NOTE, Registered Agent signature regulared when reinstance)  DATE						
FILE NOWIII FEE IS \$150.00  After May 1, 2004 Fee will be \$550.00  9. Election Campaign Finance Trust Fund Contribution.			· •••			
TITLE	OFFICERS A	ND DIRECTORS				
NAME STREET ADDRESS CITY-ST-ZIP	MELIANS, DIEGO 13280 SW 98TH STREET MIAMI, FL 33186				or the state of th	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-SI-ZIP	E Eet address			DO NOT WRITE		
name Street address City-St-Zip	7744			IN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME SIREET ADDRESS CHY-ST-ZIP					7	
12. 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 eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as regulred by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if chapter 607 or an attachment with an address, with all other like empowered.						