2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2005
Secretary of State

DOCUMENT# P99000090912

Entity Name: MCM ADVISORS CORP.

Current Principal Place of Business:

7280 W. PALMETTO PARK
SUITE 203N
BOCA RATON, FL 33433 US

New Principal Place of Business:

Current Mailing Address:

7280 W. PALMETTO PARK
SUITE 203N
BOCA RATON, FL 33433 US

New Mailing Address:

FEI Number: 65-0953962 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CAMPBELL, DWIGHT
7280 W. PALMETTO PARK
SUITE 203N
BOCA RATON, FL 33433 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: D ( ) Delete
Name: CAMPBELL, DWIGHT
Address: 5205 WHISPER DR
City-St-Zip: CORAL SPRINGS, FL 33067

Title: S ( ) Delete
Name: MOHAMMED, DONALD
Address: 18970 SW 24 STREET
City-St-Zip: PEMBROKE PINES, FL 33029

Title: T ( ) Delete
Name: MCMULLEN, ERNEST
Address: 990 NE 2ND TER.
City-St-Zip: BOCA RATON, FL 33432

Title: P ( ) Delete
Name: CAMPBELL, DWIGHT
Address: 5205 WHISPER DR
City-St-Zip: CORAL SPRINGS, FL 33067

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DWIGHT CAMPBELL P 01/10/2005

Electronic Signature of Signing Officer or Director — Date