FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(3)

MECHANICAL CONCEPTS. INC.

Mailing Address

Principal Place of Business 4902 S.W. 90TH TERRACE COOPER CITY FL 33328

4902 S.W. 90TH TERRACE

FILED Mar 16 1998 8:00am Secretary of State



COOPER CITY FL 33328 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/20/1992 2. Principal Place of Business 2s. Mailing Address Applied For Not Applicable 21 65-0334832 26 Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 8. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Ζip Country Country 8. This corporation owes or has paid the current year intangible 25 29 Personal Property Tax due June 30. Yes 24 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 61 Name FRIEDMAN, DAVID 2699 STIRLING RD., STE A-201 **B2** Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33312 83 84 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.				
SIGNATURE	Signature, typed or printed name of registered agent and	title if opplicable (NOTE	Flogistered Agent signature	e required when reinstating) DATE
12.	OFFICERS AND DI		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	Р	☐ DELETE	1,1 TITLE	P Change Addition
NAME	BROWN, DAVID H		1.2 NAME	BROWN DAVID H.
STREET ADDRESS	4902 SW 90TH TER		1.3 STREET ADDRESS	4902 SW GOTH TERR
CITY-ST-ZIP	COOPER CITY FL		1.4 CITY-ST-ZIP	COOPER CITY , FL. 33328
TITLE	D	DELETE	2 1 TITLE	Change Addition
NAME	SHAVER, SCOTT D		2.2 NAME	
STREET ADDRESS	14522 SW 75TH STREET		2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33183		2.4 CITY-ST-ZIP	<u> </u>
TITLE		DELETE	3.1 TIPLE	☐ Change ☐ Addition
NAME 1			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY+ST-ZIP			4.4 CiTY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

14. Thereby 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 supplication 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 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

(954) 434 4606 3/08/98

CR2E084 (1097)