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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V53856

(3)

Mailing Address

313 LARK AVE SEBRING FL 33872-3532

M.R.C. SERVICES, INC.

Principal Place of Basiness

313 LARK AVE

SEBRING FL 33972

FILED
Mar 26 1997 8:00am
Secretary of State

| 249   25   29   30   5   5   5   5   5   5   5   5   5   |                   |  |                                  |                  |          | 3. Date Incorporated or Qualified 07/24/1992       | 3a. Date of Last Report 04/25/1996 |  |
|--|-------------------|--|----------------------------------|------------------|----------|--|------------------------------------|--|
| Salte Act # cb   Solie Apt #, obc   Solie Apt #, ob | ,                 | Place of Business  |                                  |                  |          |  |                                    |  |
| City & State   |                   |  |                                  |                  |          | 65-0345155   |                                    |  |
| 28     29   29   30     20   30     30     30     30     30   30   | 22                |  |                                  |                  |          | 5. Certificate of Status Desired                   | 1 1                                |  |
| 249   25   29   30   5   5   5   5   5   5   5   5   5   | City & Stat<br>23 | le   | h                                |                  |          | , -  |                                    |  |
| 10, Name and Address of New Registered Agent   10, Name and Address   10, Name and Name an   |                   | 1  | ·····                            |                  | /        |  |                                    |  |
| SEBRING FL 33872  11. Pursuant to the provisions of Sections 607 0509, Florida Statutes, the above-many corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Succh change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent 1 am familiar with and accept the obligations of, Section 607 0505, Florida Statutes.  SIGNATURE  TO PRICE IS AND DIRECTORS  12. OF FICH IS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  THE DIRECTORS IN 12 Additionary of the Change of Cha |                   | 9. Name and Address of Curre   | ent Registered Agent             |                  |          | 10. Name and Address of New Re                     | gistered Agent                     |  |
| SEBRING FL 33872  83  64 City  FL  85 Zip Code  11. Persuant to the provisions of Sections 607 65402 and 607 1506. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent 1 retrieval with and accept the obligations of Section 607 0506. Florida Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  INFO DELETE 11 THE Change Addition of Change Addition Statutes.  WILLIAMS, GALE 11 AMME 12 AMME 13 SIRRET ADDRESS 13 SIRRET ADDRESS 13 LARK AVE 13 SIRRET ADDRESS 14 ACTIV-ST-Zip  DELETE 21 THE 21 THE 21 THE 23 SIRRET ADDRESS 13 SIRRET ADDRESS 14 ACTIV-ST-Zip  DELETE 31 THE 32 SIRRET ADDRESS 14 ACTIV-ST-Zip  DELTE 41 THE 32 SIRRET ADDRESS 14 ACTIV-ST-Zip  DELTETE 33 SIRRET ADDRESS 14 ACTIV-ST-Zip  DELTETE 34 SIRRET ADDRESS 14 ACTIV-ST-Zip  DELTETE 34 SIRRET ADDRESS 14 ACTIV-ST-Zip  DE | WILL              | LIAMS, GALE  |                                  | 81               | Name     |  |                                    |  |
| SEBRING FL 33872  83  64 City  FL  85 Zip Code  11. Persuant to the provisions of Sections 607 65402 and 607 1506. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent 1 retrieval with and accept the obligations of Section 607 0506. Florida Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  INFO DELETE 11 THE Change Addition of Change Addition Statutes.  WILLIAMS, GALE 11 AMME 12 AMME 13 SIRRET ADDRESS 13 SIRRET ADDRESS 13 LARK AVE 13 SIRRET ADDRESS 14 ACTIV-ST-Zip  DELETE 21 THE 21 THE 21 THE 23 SIRRET ADDRESS 13 SIRRET ADDRESS 14 ACTIV-ST-Zip  DELETE 31 THE 32 SIRRET ADDRESS 14 ACTIV-ST-Zip  DELTE 41 THE 32 SIRRET ADDRESS 14 ACTIV-ST-Zip  DELTETE 33 SIRRET ADDRESS 14 ACTIV-ST-Zip  DELTETE 34 SIRRET ADDRESS 14 ACTIV-ST-Zip  DELTETE 34 SIRRET ADDRESS 14 ACTIV-ST-Zip  DE |                   |  |                                  |                  | Street A | Idress (P.O. Box Number is Not Acceptable)         |                                    |  |
| T1. Pursuant to the provisions of Sections 607 05:02 and 607 1506, Florida Statutes, the original statutes the purpose of changing its registered agent, or harb, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent from turnibility with, and accept the obligations of, Section 607 0505, Florida Statutes.  SIGNATURE    12  |                   |  |                                  |                  | <u> </u> | Contraction (1.42) Don Hollmon to Hot Andophiania) |                                    |  |
| ## 11. Presults to the provisions of Sections 607.0502 and 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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 transformation with and accept the obligations of, Section 607.0505, Florida Statutes.  ### 12. OF FICE RS AND DIRECTORS   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  ### 12. OFFICERS AND DIRECTORS   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  ### 12. NAME   1.2 NAME   1.2 NAME   1.3 SIREET ADDRESS   1.4 CITY-ST-ZIP    ### 13. LARK AVE   1.3 SIREET ADDRESS   1.4 CITY-ST-ZIP   Change   Additional control of the provided agent of the purpose of changing its registered agent of the purpose of the appointment as registered agent of the purpose of the appointment as registered agent of the purpose of the appointment as registered agent of the purpose of the appointment as registered agent of the purpose of the appointment as registered agent of the purpose of changing its registered agent of the purpose of the appointment as registered agent of the purpose of the appointment as registered agent agent of the purpose of the appointment as registered agent agent of the purpose of the appointment as registered agent agent of the purpose of the appointment as registered agent agent of the purpose of the appointment as registered agent agent agent of the purpose of the appointment as registered agent agent of the purpose of the appointment as registered agent  |                   |  |                                  | 83               |          |  |                                    |  |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or furth, in the state of Florida Statutes, the above-named corporation's board of directors. Thereby accept the appointment as registered agent, or furth, in the state of Florida Statutes, the corporation's board of directors. Thereby accept the appointment as registered agent, or furth, in the state of Florida Statutes by the corporation's board of directors. Thereby accept the appointment as registered agent and the state of Florida Statutes by the corporation's board of directors. Thereby accept the appointment as registered agent and the state of Florida Statutes by the corporation's board of directors. Thereby accept the appointment as registered agent and the state of the change of t |                   |  |                                  | 84               | City     |  | 85 Zip Code                        |  |
| D  | SIGNATURE         | Separation space of protections of separation  | sent and otte if application (NC | TE Registereo Aç |          | oquired when reinstaling)                          | DATE                               |  |
| NAME   STREET ADDRESS   1.2 NAME   1.3 STREET ADDRESS  |                   | A COLUMN TO THE TAX TO THE COLUMN TO THE COL |                                  |                  |          | ADDITIONS/CHANGES TO OFFIC                         |                                    |  |
| STREET ADDRESS   SEBRING FL  |                   | 1 -  |                                  |                  |          |  | Li Glidilge Li Adolt               |  |
| THE FORM    |                   |  |                                  |                  |          |  |                                    |  |
| DELETE   DELETE   2.1 TITLE   Change   Addition   Add   |                   |  |                                  |                  |          |  |                                    |  |
| 22 NAME  |                   | SEBRING FL   | Teres                            |                  | ST-ZIP   |  | D 01                               |  |
| 23 STREET ADDRESS   24 CITY - ST-ZIP   |                   |  | [_] Detete                       |                  | Ī        |  | C. Cuanda C. Voon                  |  |
| CEY_SEZE   2 4 CITY_SEZE   |                   |  |                                  |                  |          |  |                                    |  |
| THE  | STREET ADDRESS    |  |                                  |                  | ļ        |  |                                    |  |
| NAME   |                   |  | T Legistre                       |                  | ST-ZIP   |  |                                    |  |
| 33 SIREET ADDRESS     34 CITY - ST - ZIP   |                   |  | LT DETERM                        |                  |          |  | LT Change LT Adolt                 |  |
| STY   ST 26   34 CITY - ST - ZIP   |                   |  |                                  |                  |          |  |                                    |  |
| DELFTE   |                   |  |                                  |                  |          |  |                                    |  |
| NAM: 4.2 NAME -(BLL) ADDRESS -(1Y-SE-ZIP 4.0 CTY-SE-ZIP  |                   |  | T 60 FTF                         |                  | S1-ZIP   |  | Change 4 de                        |  |
| 4.3 STREET ADDRESS -14 - S1 - 71P  |                   |  | FT bruth                         |                  |          |  | 亡 enange ∟ Aodit                   |  |
| 11Y-S1-70P 44 City-S1-70P  | 5                 |  |                                  |                  | 1        |  |                                    |  |
|  |                   |  |                                  |                  |          |  |                                    |  |
| DÉLÉTE PARTE L'AMBE  | •                 |  | DELFTE                           |                  | ST-ZIP   |  | Change Additi                      |  |
|  | •                 | 1  | LT Drug                          | 1                | -        |  | L_J Change L_J Adoli               |  |
| NAM: 5.2 NAME  |                   |  |                                  |                  |          |  |                                    |  |
| STREET ADDRESS   |                   |  |                                  |                  |          |  |                                    |  |
| C 19 - \$1 - 21P   |                   |  | T 60.731                         |                  | S1 - ZIP |  | [7] At [7] At                      |  |
| TILE Change Additio  |                   | \  | E' 1 DEFETE                      | 1                | 1        |  | L. Unange L. Addit                 |  |
| MAY. 62 NAME   |                   |  |                                  |                  |          |  |                                    |  |
| STREET ADDRESS 6.3 STREET ADDRESS  | STREET ADDRESS.   | T. Control of the Con |                                  |                  |          |  |                                    |  |
| 6/4 City St 2/P  6/4 Ci |                   |  |                                  |                  |          |  |                                    |  |

4. I do hereby cert ly 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 undor 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 in the analysis of the process of the chapter of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

SWATURE AND TYPED OF CONTROL OF STORMS OF FICER OF DIRECTOR

3-10-97

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