

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000107514

**Entity Name:** MC SQUARED, INC.

**Current Principal Place of Business:**

5808-A BRECKENRIDGE PARKWAY  
TAMPA, FL 33610

**Current Mailing Address:**

1275 SHILOH RD  
SUITE 2620  
KENNESAW, GA 30144

**FEI Number:** 90-0033880

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MOUSSLY, SAMEER  
5808-A BRECKENRIDGE  
TAMPA, FL 33610 US

*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

**Officer/Director Detail :**

Title CEO  
Name MOUSSLY, SAMEER  
Address 1275 SHILOH RD SUITE 2620  
City-State-Zip: KENNESAW GA 30144

Title VPD  
Name KERMIT, SCHMIDT  
Address 5808-A BRECKENRIDGE PKWY  
City-State-Zip: TAMPA FL 33610

Title PD  
Name MOUSSLY, JOY D  
Address 5808-A BRECKENRIDGE PKWY  
City-State-Zip: TAMPA FL 33610

Title VP  
Name DISTEFANO, JOSEPH  
Address 5808-A BRECKENRIDGE PKWY  
City-State-Zip: TAMPA FL 33610

*I hereby 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 all other like empowered.*

**SIGNATURE:** SAMEER MOUSSLY

**CEO**

**01/25/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date