

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P17000062552

**Entity Name:** MWE, N.A. CORPORATION

**Current Principal Place of Business:**

49 NORTH FEDERAL HIGHWAY  
318  
POMPANO BEACH, FL 33062

**Current Mailing Address:**

49 NORTH FEDERAL HIGHWAY  
318  
POMPANO BEACH, FL 33062

**FEI Number:** 82-2691733

**Certificate of Status Desired:** No

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

EBERT, STEFAN  
49 NORTH FEDERAL HIGHWAY  
318  
POMPANO BEACH, FL 33062 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 P ,D  
Name EBERT, STFAN  
Address 49 NORTH FEDERAL HIGHWAY #318  
City-State-Zip: POMPANO BEACH FL 33062

Title VP,D  
Name HRUBY, SVEN  
Address 49 NORTH FEDERAL HIGHWAY #318  
City-State-Zip: POMPANO BEACH FL 33062

Title T,D  
Name EBERT, CARMELLA  
Address 49 NORTH FEDERAL HIGHWAY #318  
City-State-Zip: POMPANO BEACH FL 33062

Title S,D  
Name HRUBY, ANJA  
Address 49 NORTH FEDERAL HIGHWAY #318  
City-State-Zip: POMPANO BEACH FL 33062

*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:** CARMELLA EBERT

**TREASURER**

**01/11/2018**

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

\_\_\_\_\_  
Date