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Feb 12 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L11962 (2)

1. Corporation Name
MCF SYSTEMS ATLANTA, INC.



Principal Place of Business: 5351 SNAPPINGER WOODS DRIVE, DECATUR GA 30035 US
Mailing Address: 5353 SNAPPINGER WOODS DR, DECATUR GA 30035-4028 US

3. Date Incorporated or Qualified: 08/25/1989
3a. Date of Last Report: 02/22/1996
4. FEI Number: 59-2966975
5. Certificate of Status Desired: [] \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: [] \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: [] Yes [] No

2. Principal Place of Business
21. Suite, Apt. #, etc.
22. City & State
23. Zip
24. Country
25. Country
26. Mailing Address
27. Suite, Apt. #, etc.
28. City & State
29. Zip
30. Country

9. Name and Address of Current Registered Agent
RUBIN, STEVEN D.
2200 MUSEUM TOWER
150 WEST FLAGLER STREET
MIAMI FL 33130

10. Name and Address of New Registered Agent
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS	
TITLE	D [] DELETE
NAME	MOSLEY, SIGMUND
STREET ADDRESS	945 E PACES FERRY RD, STE 2450
CITY - ST - ZIP	ATLANTA GA
TITLE	D [] DELETE
NAME	MENDEZ, CHARLES E. JR.
STREET ADDRESS	5351 SNAPPINGER WOODS DRIVE
CITY - ST - ZIP	DECATUR GA
TITLE	D [] DELETE
NAME	FLECK, STEVEN WARREN
STREET ADDRESS	5353 SNAPPINGER WOODS DR
CITY - ST - ZIP	DECATUR GA
TITLE	[] DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	[] DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	[] Change [] Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	[] Change [] Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	[] Change [] Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	[] Change [] Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	[] Change [] Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	[] Change [] Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby 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 supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ DATE: 2/7/97 770-593-9454

CR2E034 (9/96)