

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 MAY -1 PM 1:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K65961

(0)

1. Corporation Name

MICROTEK INDUSTRIES, INC.

Principal Place of Business

**2350 COMMERCE PARK DRIVE
SUITE 1
PALM BAY FL 32905-7721
US**

Mailing Address

**2350 COMMERCE PARK DR.
SUITE 1
PALM BAY FL 32905-7721
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

02/15/1989

3a. Date of Last Report

05/01/1994

4. FEI Number

59-2929444

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

7. This corporation has liability for intangible tax under S. 193.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc

2a. Mailing Address

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

24 Country

28 Zip

29 Country

9. Name and Address of Current Registered Agent

**GROSSMAN, RICHARD A.
235 RIGGS AVENUE
MELBOURNE BEACH FL 32951**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

444 Riverview Lane

83 **Melbourne Beach, FL 32951**

84 City

FL

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

Signature (typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent Signature required when substituting)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	GROSSMAN, RICHARD A.
STREET ADDRESS	235 RIGGS AVE.
CITY- ST- ZIP	MELBOURNE BCH. FL
TITLE	SD
NAME	JORDAN, CHARLES J.
STREET ADDRESS	230 RIGGS AVE.
CITY- ST- ZIP	MELBOURNE BCH. FL
TITLE	T
NAME	ROMANO, DARLENE M.
STREET ADDRESS	215 BALLYSHANNON ST APT 201-C
CITY- ST- ZIP	MELBOURNE BCH FL
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
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	444 Riverview Lane
1.4 CITY- ST- ZIP	Melbourne Beach, FL 32951
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	235 Riggs Avenue
3.4 CITY- ST- ZIP	Melbourne Beach, FL 32951
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 is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 (changed, or on an attachment with an address

SIGNATURE:

Darlene M. Romano

Darlene M. Romano, Treasurer

4/26/95

(407) 728-7852