

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K51093

Entity Name: MICRO TYPING SYSTEMS, INC.

Current Principal Place of Business:

1295 SOUTH WEST, 29TH AVENUE
POMPANO BEACH, FL 33069

Current Mailing Address:

1295 SOUTH WEST, 29TH AVENUE
POMPANO BEACH, FL 33069 US

FEI Number: 22-3329332

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 DIRECTOR
Name YATES, ROBERT
Address 1295 SOUTH WEST, 29TH AVENUE
City-State-Zip: POMPANO BEACH FL 33069

Title DIRECTOR
Name CAPELLO, JEFFREY
Address 1295 SOUTH WEST, 29TH AVENUE
City-State-Zip: POMPANO BEACH FL 33069

Title DIRECTOR
Name SCHLESINGER, MICHAEL
Address 1295 SOUTH WEST, 29TH AVENUE
City-State-Zip: POMPANO BEACH FL 33069

Title SECRETARY
Name SCHLESINGER, MICHAEL
Address 1295 SOUTH WEST, 29TH AVENUE
City-State-Zip: POMPANO BEACH FL 33069

Title TREASURER
Name CAPELLO, JEFFREY
Address 1295 SOUTH WEST, 29TH AVENUE
City-State-Zip: POMPANO BEACH FL 33069

Title CEO
Name MAD AUS, MARTIN
Address 1295 SOUTH WEST, 29TH AVENUE
City-State-Zip: POMPANO BEACH FL 33069

Title CHAIRMAN OF THE BOARD
Name MAD AUS, MARTIN
Address 1295 SOUTH WEST, 29TH AVENUE
City-State-Zip: POMPANO BEACH FL 33069

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: MICHAEL SCHLESINGER

SECRETARY

05/01/2017

Electronic Signature of Signing Officer/Director Detail

Date