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

**PROFIT** CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

(6)

MUTUAL TRUST & INVESTMENT CORPORATION

Mailing Address Principal Place of Business



3341 SOUTHWEST 40TH AVENUE HOLLYWOOD FL 33023			3341 SOUTHWEST 40TH AVENUE HOLLYWOOD FL 33023						
						3. Date Incorporated or Qualified 08/18/1975	3a, Date		Report / <b>1995</b>
2. Principal Place of Business 2			Mailing Address			4. FEI Number			Applied For
<u> </u>		26	26			59-1618080		×	Not Applicable
Suite, Apt #,	etc.	Suite 27	Apt. #, etc.			5. Certificate of Status Desired			75 Additional e Required
City & State		City 8	3 State			Election Campaign Financing     Trust Fund Contribution		Ad	.00 May Be ded to Fees
Zip	Country 25	Zтр <b>29</b>	-ı <u> </u> -ı				es XNo		
<u> </u>	9. Name and Address of Co		Agent			10. Name and Address of New I	Registered /	gent	
				81	Name				
CANUEL	L, GUY M			83	Street Ac	kiress (P.O. Box Number is Not Accepta	ble)		
	OUTH WEST 40TH AVENU	F			Street At	Kiless (F.O. Dokttorise)			
	VOOD FL 33023	-		83					
1102211	1000 12 00020			_	<u> </u>			85	Zip Code
				84	City		FL	63	24 0000
SIGNATURE	agent, or both, in the State of and accept the obligations of				ol signature ris	ed wite Treastating	DA <sup>†</sup> t		
12.	OFFICER	SIAND DIRECTORS		13.		ADDITIONS/CHANGES TO OF			
TITLE	PD		DELETE	1 1 ftiful			L	Chan	ge 🔲 Addition
NAME	CANUEL, GUY M			1.2 NAMI					
STREET ADDRESS	3341 SOUTHWEST 40	TH AVE.		1.3 S1RE	EF ADDRESS				
C-TY-ST-ZIP	HOLLYWOOD FL			1.4.001				<b>-</b>	
TITLE	VST		DELETE	2 1 T TL			Į	Chan	ge
NAME	CANUEL, LAURA B			2.2 NAM					
STREET ADDRESS	3341 SOUTHWEST 40	th ave.		2 3 STRE	E! ADDRESS				
CITY-ST-ZIP	HOLLYWOOD FL			2 4 CHY			<u></u>	Char	ge Addition
11TLE			☐ DELETE	3 1 1111			L		1138-11611
NAME				3.2 NAM					
STREET ADDRESS					ET ADDRESS				
CITY-ST-ZIP			DELETE	34 City 4 1 HTs				Char	ige Addition
TITLE			C becen	4 2 NAM					
NAME				1	ET ADDRESS				
STREET ADDRESS					-S1-7IF				
CITY-ST-ZIP TITLE			☐ DELETE	5 1111				Chai	nge 🔲 Addition
NAME			—	5.2 NAM	ε				
STREET ADDRESS					E1 ADDRESS				
CITY-ST-ZIP				5.4 C(T)	- ST- ZIP				
TITLE			DELETE	€ 1 7(7)				Cha	nge 🔲 Addition
NAME				6.2 NAM	ri l				
STREET ADDRESS				63 STR	EFT ADDRESS				
A.T. 61 3/6				6.4 CIT <sup>4</sup>	- ST- 2IP				
9/11 9/14/1	and the the information of	action with this floor	cie voluntarily fu	roished and d	nes not qua	by for the exemption stated in Section 1:	19 02(3)(k), FI	orida S	tatutes. 1 further

Loo nereby cernly that the information supplied with this filing is voluntarily furnished and does not quality for the exemption stated in Section 119 07(3)(k). Florida Statutes Lifurither 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 logal 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 13,339 langed, or on an attachment with an address

SIGNATURE: