


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Jan 23 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # F92000000127 (2)

1. Corporation Name  
MARTA TECHNOLOGIES, INC.

Principal Place of Business  
25101 CHAGRIN BOULEVARD  
BEACHWOOD OH 44122

Mailing Address  
25101 CHAGRIN BOULEVARD  
BEACHWOOD OH 44122



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/05/1992	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 34-1721126	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324		81	Name
		82	Street Address (P.O. Box Number is Not Acceptable)
		83	
		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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PAUL, ROBERT G	1.2 NAME	
STREET ADDRESS	25101 CHAGRIN BLVD.	1.3 STREET ADDRESS	
CITY-ST-ZIP	BEACHWOOD OH 44122	1.4 CITY-ST-ZIP	
TITLE	VPD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	YOUDELMAN, ROBERT A	2.2 NAME	
STREET ADDRESS	25101 CHAGRIN BLVD.	2.3 STREET ADDRESS	
CITY-ST-ZIP	BEACHWOOD OH 44122	2.4 CITY-ST-ZIP	
TITLE	VPS	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FOLAN, MCDARA P III	3.2 NAME	
STREET ADDRESS	25101 CHAGRIN BLVD.	3.3 STREET ADDRESS	
CITY-ST-ZIP	BEACHWOOD OH 44122	3.4 CITY-ST-ZIP	
TITLE	VTCD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEPORTE, JAMES A	4.2 NAME	
STREET ADDRESS	25101 CHAGRIN BOULEVARD	4.3 STREET ADDRESS	
CITY-ST-ZIP	BEACHWOOD OH 44122	4.4 CITY-ST-ZIP	
TITLE	AS	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	AMIRA, ALAN J	5.2 NAME	
STREET ADDRESS	25101 CHAGRIN BLVD	5.3 STREET ADDRESS	
CITY-ST-ZIP	BEACHWOOD OH 44122	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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:  1/6/98 216-765-5808

CR2E034 (10/97)



Allen Telecom Inc.

25101 Chagrin Blvd

Beachwood, Ohio

44122-5687 U.S.A.

Phone: 216-765-5800

FAX: 216-765-0410

January 14, 1998

Florida Department of State  
Division of Corporation  
Annual Reports Section  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Re: Marta Technologies Inc.  
Florida Annual Report

Dear Processor:

Enclosed is the above referenced annual report.

The annual report reflects a fee due of \$150.00 for which we have enclosed our check.

Very truly yours,

A handwritten signature in cursive script that reads "Edward A. Williams".

Edward A. Williams  
Tax Manager

EAW:rlj  
Enclosure