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

PROFIT CORPORATION ANNUAL REPORT

1996



SIGNATURE: LOUND SIGNATURE AND TYPED OF PRINTED AME OF SIGN

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

DOCUMENT #

1. Corporation Name

F9300002360 (6)

NMTC, INC.

Principal Place of Business Mailing Address					I IRRIIDA IIIA IBIBS IIIII BRIII ADIR	1 68111 00111 1011A 1140	M (1113) #1110 #010 1001
			4403 ALLEN ROAD STOW OH 44224				
					3. Date Incorporated or Qualified 05/10/1993	3a. Date of Las 04/25/	
2. Principal Plac	ce of Business	h	ailing Address	W 1.5/.	4. FEI Number 34-1728074		Applied For
21	oto .	26	ito Ant # etc		34°1728074	40	Not Applicable .75 Additional
Suite, Apt. #.	, etc.	27	ite, Apt. #, etc.		5. Certificate of Status Desired	7 -	ee Required
City & State			y & State		6. Election Campaign Financing	\$ \$	5.00 May Be
23		28			Trust Fund Contribution		dded to Fees
Ζφ	Country	Zış	1	Country	8. This corporation has liability for i	intangible tax unde X No	ers 199.032,
24	9. Name and Address of Curren	29 Registere	ed Agent		Florida Statutes Yes 10. Name and Address of New R		
	3, 10110 010 110 110			81 Name		J. W	
CT COR	PORATION SYSTEM			82 Street Add	ress (P.O. Box Number is Not Acceptab	le)	
1200 S.	PINE ISLAND ROAD			ST STEET ACT	reas (
PLANTA	TION FL 33324			83			
				84 City		85	Zip Code
						<u> </u>	
or registere	othe provisions of Sections 607,0502 and algent, or both, in the State of Floric it, and accept the obligations of, Sections	dat S uch on	ange was author	ized by the corporation's bea	ration submits this statement for the pur rid of directors. Thereby accept the app	ointment as regist	ered agent. I am
SIGNATURE							
12.	Squature, typied or profesionalnic of registers (agent OFFICERS AN)	and the second		(2) Federal de Agent signature responsi 13.	ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIRE	CTORS IN 12
TITLE	D		DELETE	1 1 TITLE		☐ Cnai	
NAME	SHERMAN, GEORGE M			1.2 NAME			
STREET ADDRESS	1250 24TH STREET, NW			1.3 STREET ADDRESS			
C(TY - ST - ZIP	WASHINGTON DC 20037			1.4 CFY - SE-ZIP			
FILE	SD SOOT		DELETE	2 1 Tifle		☐ Cha	nge [Addition
NAME	BRANNAN, C. SCOTT			2.2 NAME			
STREET ADDRESS	1250 24TH STREET, NW			2.3 STREET ADDRESS			
CITY-ST-ZIP	WASHINGTON DC 20037		["] DELETE	2.4 CITY ST ZIP 3.1 THE		Cha	nge
TITLE	DITKOFF, JAMES H		בייטנוניו	3 ? NAME			ingo [] Addition
NAME STREET ADDRESS	1250 24TH STREET, NW			3 STREET ADDRESS			
CITY-ST-ZIP	WASHINGTON DC 20037			3 CITY-ST-ZIF			
TITLE	Р		DELETE	4 1 TIFLE		☐ Cha	nge 🔲 Addition
NAME	ALLENDER, PATRICK W			4.2 NAME			
STREET ADDRESS	1250 24TH STREET, N.W.			4.3 STREET ADDRESS			
CITY-ST-ZIP	WASHINGTON DC			4.4 C(TY - ST - Z(P			
TITLE	T		DEFEIE	5 1 TITLE		☐ Cha	nge 🔲 Addition
NAME	MICHAUD, RAYMOND J			5.2 NAME			
STREET ADDRESS	4403 ALLEN ROAD			5.3 STREET ADDRESS			
CITY-ST-2(P	STOW OH 44224		EJ britst	5.4 CITY - \$1 - ZIP		Cha	inge
TITLE			DELETE	6 THE		Ст Спа	ingo [_] Moumort
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS 6.4 CHY+ST+ZIP			
14. Ldo hereby	certify that the information supplied	with this for	ng is vojuntarily fu	rnished and does not qualify	for the exemption stated in Section 119	.07(3)(k). Florida S	tatutes. I further
certify that oath; that I	the information indicated on this annu	ua! report or eration or th	r supplemental al e receiver or trus	inual report is true and accur tee empowered to execute th	ate and that my signature shall have the ais report as required by Chapter 607, F	: samo lega! effect	as if made under

RAYMOND J. HICHAUD 4-8-96 (214) 929-4949