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May 06 1997 8:00am

Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # F93000004711 (8)

1. Corporation Name
MTI INVESTMENT INC.



Principal Place of Business
5320 EDGEWATER DRIVE
ORLANDO FL 32810
US

Mailing Address
5320 EDGEWATER DRIVE
ORLANDO FL 32810-5251
US

3. Date Incorporated or Qualified
10/19/1993

3a. Date of Last Report
01/23/1996

2. Principal Place of Business

21 1002 Felix Ct.

Suite, Apt. #, etc.

22 City & State
Apopka FL

23 Zip 32706 Country USA

2a. Mailing Address

26 1002 Felix Ct

Suite, Apt. #, etc.

27 City & State
Apopka FL

28 Zip 32706 Country USA

4. FEI Number
38-3073268

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

MURPHY, TIM
5960 SCOTCH GLEN #108
ORLANDO FL 32808

10. Name and Address of New Registered Agent

81 Name Timothy J. Murphy

82 Street Address (P.O. Box Number is Not Acceptable)
46 1002 Felix Ct

83

84 City Apopka

FL

85 Zip Code 32706

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 date if applicable

TIMOTHY J. Murphy - President 4/28/97

(NOTE: Registered Agent Signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PS
NAME MURPHY, TIM
STREET ADDRESS 3790 W. HOWELL
CITY-ST-ZIP MASON MI

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

14. I do 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:

Timothy J. Murphy 4/28/97 (5171676-37X)

CR2E034 (9/96)