

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

APR 10 1995



APPROVED
AND
FILED

DOCUMENT # F94000006489 (8)

50 MAY 10 AM 10:35

M.K.T., INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

5721 CAMELOT DR.
CHARLOTTE NC 28270

5721 CAMELOT DR.
CHARLOTTE NC 28270

3	12/19/1994	3a	N/A
4	56-1888251	Agreement	
		Not Applicable	
5	Certificate of Status Document		\$8.75 Additional Fee Required
6			\$5.00 May Be Added to Fees
8	This corporation has initially been organized in accordance with the Florida Statutes ☐ Yes ☒ No		

21	4317 W. Pensacola St.	26	4317 W. Pensacola St.
22	Tallahassee FL	27	Tallahassee FL
23	32304	28	32304
24	31302	29	31302
25	U.S.A.	30	U.S.A.

9. Name and Address of Current Registered Agent

CALDWELL, EDDIE M
4317 W. PENSACOLA ST.
TALLAHASSEE FL 32304

10. Name and Address of New Registered Agent

01	Name	
02	Street Address (P.O. Box Number is Not Acceptable)	
03	City	
04	State	FL
05	Zip Code	

11. Pursuant to the provisions of Sections 607.02, 607.03, and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent in part 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 this position under the Florida Statutes.

SIGNATURE

Eddie M. Caldwell

Signature of Registered Agent or Registered Agent in Charge

12. OFFICERS AND DIRECTORS		13. STOCKHOLDERS	
NAME	PD CALDWELL, EDDIE M 5721 CAMELOT DR. CHARLOTTE NC 28270	NAME	
NAME	VST CALDWELL, SHERYL L 5721 CAMELOT DR. CHARLOTTE NC 28270	NAME	
NAME		NAME	
NAME		NAME	
NAME		NAME	
NAME		NAME	
NAME		NAME	
NAME		NAME	
NAME		NAME	
NAME		NAME	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not apply, for the corporation stated in Sections 607.02, 607.03, Florida Statutes, or that I am not a shareholder of the corporation and that my signature does not have the same legal effect as if I were a shareholder of the corporation and that my signature on this report is required by the Florida Statutes, and that my signature on this report is required by the Florida Statutes.

SIGNATURE:

Eddie M. Caldwell
SIGNATURE AND PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

58-95 904-575-7124