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

Block 12 or Block 13 if changed, 0409

SIGNATURE:

Apr 15 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (2)MERTEK, INC. Principal Place of Business Mailing Address 185 HANGING MOSS LANE 185 HANGING MOSS LANE DELTONA FL 32725 DELTONA FL 32725 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/01/1984 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For SAME ame Not Applicable 59-2471647 Suite, Apl. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Zip Country Country Žφ 8. This corporation owes or has paid the currept year Intangible 24 25 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 Name CULTON, ROBERT H. # **539 VERSAILLES DRIVE** Street Address (P.O. Box Number is Not Acceptable) SUITE 100 83 MAITLAND FL 32751 84 City 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 (10/97) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 TITLE ROTHROCK, MICHAEL E. NAME 1.2 NAME CR2E034 185 HANGING MOSS LANE 1.3 STREET ADDRESS STREET ADDRESS **DELTONA FL** CHY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETË Change Addition TITLE 3.1 TITLE 32 NAME NAME STREET ADDRESS **33 STREET ADDRESS** 3.4. CITY-ST-ZIP CITY-ST-7IP Change DELETE Addition 4.1 TITLE TITLE NAME 4. 2 NAME STREET ADORESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETÉ Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Change DELETE Addition 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADORESS STREET ADDRESS 6.4 CITY-ST-ZIP 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 employees to steep the this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, propagate attackment with appears in the corporation of the corpor

Michael ERothpock 9 April 8

FILED