

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

**APPROVED
AND
FILED**

**CORPORATION
ANNUAL REPORT
1995**



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

95 MAY - 1 AM 8:57

DOCUMENT # J09197 (1)

1. Corporation Name:
MTS, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business:
**% MARTINA M. BOREK
12110 SOUTHWEST 248TH STREET
PRINCETON FL 33032**

Mailing Address:
**% MARTINA M. BOREK
12110 SOUTHWEST 248TH STREET
PRINCETON FL 33032**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **04/15/1986**
3a. Date of Last Report: **01/24/1994**

2. Principal Place of Business: **21**
2a. Mailing Address: **26**

4. FEI Number: **59-2674405**
Applied For: Not Applicable

Suite, Apt. #, etc.: **22**
Suite, Apt. #, etc.: **27**

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

City & State: **23**
City & State: **28**

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

County: **24** County: **25** County: **29** County: **30**

6. This corporation has liability for franchise tax under § 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BOREK, MARTINA M.
12110 SOUTHWEST 248TH STREET
PRINCETON FL 33032**

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 607.0602 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 Sections 607.0604, Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Registered Agent's Representative)

(Signature of Registered Agent or Registered Agent's Representative)

12. OFFICERS AND DIRECTORS		13. ADDITIONS CHANGED TO OFFICERS AND DIRECTORS IN 1995	
TITLE	PD	1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BOREK, MARTINA M.	2. NAME	
STREET ADDRESS	12110 SW 248TH STREET	3. STREET ADDRESS	
CITY, STATE, ZIP	PRINCETON FL	4. CITY, STATE, ZIP	
TITLE		5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6. NAME	
STREET ADDRESS		7. STREET ADDRESS	
CITY, STATE, ZIP		8. CITY, STATE, ZIP	
TITLE		9. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		10. NAME	
STREET ADDRESS		11. STREET ADDRESS	
CITY, STATE, ZIP		12. CITY, STATE, ZIP	
TITLE		13. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		14. NAME	
STREET ADDRESS		15. STREET ADDRESS	
CITY, STATE, ZIP		16. CITY, STATE, ZIP	
TITLE		17. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		18. NAME	
STREET ADDRESS		19. STREET ADDRESS	
CITY, STATE, ZIP		20. CITY, STATE, ZIP	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 119.077(3)(b), Florida Statutes. I further certify that the information included in 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. If I am an officer or director of the corporation or the treasurer or business empowers to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13, I do, I changed or am an alteration with an address.

SIGNATURE:

Martina Borek, P. 30
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/95

FD-350 (Rev. 8-83)