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

PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP

Block 12 or Block 13 if change it, or on an attachment with



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K57377

(9)

MANAGEMENT INFORMATION TECHNOLOGIES, INC.

Principal Place of Business Mailing Address C/O HARVARD L. PIKE. JR C/O HARVARD L. PIKE, JR. 5238 JENNIFER PLACE **5238 JENNIFER PLACE** DO NOT WRITE IN THIS SPACE ORLANDO FL 32807 ORLANDO FL 32807 3. Date Incorporated or Qualified 01/11/1989 2a, Mailing Address 4. FEI Number 2. Principal Place of Business Applied For Not Applicable 59-2950289 Suite, Apt #, etc. \$8.75 Additional Sulte, Apt. #, etc 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 23 Zip Country Žiρ Country 8. This corporation owes or has paid the current year intangible 24 Personal Property Tax due Jurie 30. ☐ Yes 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Fiegistered Agent 81 Name PIKE, HARVARD L., JR. **5238 JENNIFER PLACE** Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32807 83 84 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 Signature, typed or printed name of registered agent and title if approache (NOTE flugistered Agent signature required wher reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12, 13. DELETE Change ■ Addition DPV 1.1 TITLE TITLE PIKE, HARVARD L., JR. NAME 1.2 NAME **5238 JENNIFER PLACE** STREET ADDRESS 1.3 STREET ADDRESS **O**RLANDO FL 1.4 CiTY - ST - 7IP CITY-ST-ZIP Change Addition ☐ DELETE 21 TITLE TITLE ĎŠT PIKE, MARY ANNE NAME 22 NAME **\$238 JENNIFER PLACE** STREET ADDRESS 2.3 STREET ADDRESS **O**RLANDO FL CITY-ST-ZIP 2 4 City-St-ZiP DELETE ☐ Change Addition TITLE 31 THILE NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-ZIP Change Addition DELETE 41 TITLE TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 C/TY - ST - 7/P CITY-ST-ZIP Change Addition DELETE 51 THLE TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

64 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

with an address.

1/27/00 (107)202/24

FILED

May 14 1998 8:00am

Secretary of State