2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Aug 13, 2008
Secretary of State

DOCUMENT# K72759

Entity Name: M T P ENTERPRISES, INC.

Current Principal Place of Business:

866 SOUTH GOLDENROD ROAD
ORLANDO, FL 32822

New Principal Place of Business:

Current Mailing Address:

866 SOUTH GOLDENROD ROAD
ORLANDO, FL 32822

New Mailing Address:

FEI Number: 59-2475132 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

REEVES, TOM
866 SOUTH GOLDENROD RD
ORLANDO, FL 32822 US

Name and Address of New Registered Agent:

SCHWIER, PAMELA
866 SOUTH GOLDENROD RD
ORLANDO, FL 32822 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: PAMELA SCHWIER 08/13/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: REEVES, TOM
Address: 1530 CASA RIO DRIVE
City-St-Zip: ORLANDO, FL

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: DST ( ) Change (X) Addition
Name: SCHWIER, PAMELA
Address: 866 SOUTH GOLDENROD ROAD
City-St-Zip: ORLANDO, FL 32862

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAMELA SCHWIER ST 08/13/2008
Electronic Signature of Signing Officer or Director Date