FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

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

APPROVED
AND
FILED

95 MAY -1 PM 10:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K93177 (9)

1. Corporate Name
MT ASSOCIATES, INC.

Principal Place of Business
433 PLAZA REAL
335
BOCA RATON FL 33432
US

Mailing Address
433 PLAZA EAL
335
BOCA RATON FL 33432
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/06/1989
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business
21
Suite Apt. # or Bldg.
22
City & State
23
Zip
24 25

2a. Mailing Address
26
Suite Apt. # or Bldg.
27
City & State
28
Zip
29 30

4. FEI Number: 65-0124886 — Applied For / Not Applicable

5. Certificate of Status Desired [ ] — $8.75 Additional Fee Required

6. Elected Officers/Directors Required [ ] — $5.00 May Be Added to Fees

8. Does corporation conduct business in Florida Statutes? [ ] Yes [✓] No

9. Name and Address of Current Registered Agent
WHITE & CASE
200 W BISCAYNE BLVD
MIAMI FL 33131

10. Name and Address of New Registered Agent
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 section [illegible] 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. The corporation agrees that it will comply with the laws of this state that are applicable to the performance of its duties as a corporation doing business in this state. I hereby accept the appointment as registered agent and agree to act in this capacity.

SIGNATURE

12. Officers and Directors

Title	DP
Name	CROCKER, THOMAS J.
Street Address	433 PLAZA REAL, SUITE 335
City, St, Zip	BOCA RATON FL
Title	VSA
Name	TOMIKO, JOHN L.
Street Address	433 PLAZA REAL SUITE 335
City, St, Zip	BOCA RATON FL
Title	VTA
Name	ONSIKO, ROBERT E.
Street Address	433 PLAZA REAL SUITE 335
City, St, Zip	BOCA RATON FL
Title	
Name	
Street Address	
City, St, Zip	
Title	
Name	
Street Address	
City, St, Zip	
Title	
Name	
Street Address	
City, St, Zip	

13. Additional Officers and Directors [illegible]
Title [ ] Change [ ] Add
Name
Street Address
City, St, Zip
Title [ ] Change [ ] Add
Name
Street Address
City, St, Zip
Title [ ] Change [ ] Add
Name
Street Address
City, St, Zip
Title [ ] Change [ ] Add
Name
Street Address
City, St, Zip
Title [ ] Change [ ] Add
Name
Street Address
City, St, Zip
Title [ ] Change [ ] Add
Name
Street Address
City, St, Zip

14. Delinquent, Until Paid [illegible] Florida Statutes, Chapter [illegible]

SIGNATURE: ROBERT E. ONISICO 4/27/95 (407) 395-9666
SIGNATURE AND TYPED OR PRINTED NAME OF WORKING OFFICER OR DIRECTOR

0437202 FP