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

PROFIT CORPORATION ANNUAL REPORT



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

1996	
DOCUMENT #	Y

(9)

MT ASSOCIATES, INC.



Principal Place	of Business	Mailing Addr	vess				is i <b>n</b> ni ninit nini		ı dığılı Biğir iğğı
433 PLAZA		433 PLA							
335		335							
BOCA RATON FL 33432 BOCA RATON FL 33432 US US					3. Data Incorrectated or Qualified	20 Date of	Last Do	ood I	
00		00				3. Data hoomprated or Qualified 06/06/1989	3a. Date of	/01/19	i <b>9</b> 5
2. Principal Pla	ice of Business	2a. Mailing A	Address			4. FEI Number 65-0124886		$\rightarrow$	pplied For
21 Cuito Ant A	s do	26 Suits Ar							lot Applicable   Additional
Suite, Apt # 22	r, etc.	Suite, Ap	д. ғ, ек.			5. Certificate of Status Desired			Additional lequired
City & State		City & S:	ate			Election Campaign Financing Trust Fund Contribution		•	May Be to Fees
Zip	Country	Zip		ountry		B. This corporation has liability for i	ntangible tax u		
24	25	29	30			Florida Statutes	No		
	9. Name and Address of Current	Registered Age	ent	L		10. Name and Address of New R	egistered Ag	ent	
I LM APPE	0.0105			81	Name				
	& CASE BISCAYNE BLVD			82	Street Add	ress (P.O. Box Number is Not Acceptab	le)		
	FL 33131								
ini(Am)	16 33131			83					
				84	City		FL	<b>85</b> Zip	Code
11. Pursuant t	o the provisions of Sections 607,0502	and 607.1508. FI	lorida Stalutes, the a	hove	L named corpo	ration submits this statement for the pur	oose of chanc	jing its re	gistered office
or Pegister	ed agent, or both, in the State of Florid- h, and accept the obligations of, Section	a. Suich change v	was authorized by th	e cott	oration's boa	ird of directors. Thereby accept the appoint	bintment as re	gistered	agent. Lam
	The accept the deligations of coole	71 Oct 100000, 1100	Allo Gillianos:						
SIGNATURE _	Signature, typed or printed harre of registered agest a	not bleed applicative	füllt. Begiste	red Age	ntsgnatore require	el wien renslatinge	DATE		
12.	OFFICERS AND		1;			ADDITIONS/CHANGES TO OFF			
†ITLE	CROCKER, THOMAS J.	LJ	·	1 TITLE				Change	Addition
NAME	433 PLAZA REAL, SUITE 33	5		2 NAME					
STREET ADDRESS	BOCA RATON FL	-			1 ADDRESS				
CITY-SI-ZIP TITLE	VSA			1 THEE				Change	Addition
NAME	TOMIKO, JOHN L.			2 NAME				e lange	
STREET ADDRESS	433 PLAZA REAL SUITE 335	<b>,</b>			LADDRESS				
CITY - ST - ZIP	BOCA RATON FL			4 C+1Y -					
TITLE	VfA			1 TITLE				Change	Addition
NAME	ONSIKO, ROBERT E	_	3.	2 NAME					
STREET ADDRESS	433 PLAZA REAL SUITE 335	<b>)</b>	3.	3 STREE	1 ADDRESS				
CITY - ST - ZIP	BOCA RATON FL		3	4 CHY -	ST-ZIP				
TITLE			DELETE 4	1 TITLE				Change	Addit on
NAME				2 NAML					
STREET ADDRESS			i i		T ADDRESS				
CITY - ST - ZIP				4 CITY				Change	Add tion
TITLE				1 FILLE 2 KARE	1		Ц	ona lyc	☐ Rud (fell
NAME expect approace			1	2 NAME a etres					
STREET ADDRESS					T ADDRESS				
CITY-ST-ZIF TITLE				4 CITY - 1 TITLE			<u>,</u> []	Change	Addition
NAME				2 NAME		3000018 -06/03/96010	1,721	,3°	
STREET ADDRESS					T ADDRESS	-06/03/96010	JZ 1USI	J	
CITY - ST - ZIP					ST-7.P	***200.00			
						4. Maria - January Maria Maria Constinue 110	ORIONAL FILE	L- Ch-1	1.6 .41

I do hereby certify that the information applied we certify that the information indicated on this annuloath; that I am an officer of director of the consortance appears in Block 12 or Block 13 if a langed, or or h this fling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under one of the same legal effect as if made under one of the same legal effect as if made under one of the same legal effect as if made under one of the same legal effect as if made under one of the same legal effect as if made under one of the same legal effect as if made under one of the same legal effect as if the same leg

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR CONSTITUTE ON STATE Y/20/16 407-345-96