

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
Division of Corporations

**APPROVED
AND
FILED**

DOCUMENT # L08494

(1)

95 MAY -1 AM 10:35

1. Corporation Name

METALLIC TECH, INC.

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

Principal Office Address

**9291 SW 186 TERR
MIAMI FL 33157
US**

Mailing Address

**9291 SW 186 TERR
MIAMI FL 33157
US**

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified
08/11/1989

3a. Date of Last Report
04/20/1994

2. Principal Office Address

21

2a. Mailing Address

26

4. FEI Number

65-0186521

Applied For

Not Applicable

State Apt. # etc.

22

State 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**

Zip

24

Country

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Zip

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Country

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8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SEMEL, PHILIP C.
9291 SW 186 TERR.
MIAMI FL 33157**

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 607.1509, 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 607.0609, Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Director)

(Signature of Registered Agent or Director)

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME

**PTD
SEMEL, PHILIP
9291 SW 186TH TERRACE
MIAMI FL**

1. NAME

1. NAME

1. STREET ADDRESS

1. CITY, ST, ZIP

☐ Change ☐ Addition

2. NAME

**VSD
SEMEL, KAREN
9291 SW 187TH TER
MIAMI FL**

2. NAME

2. NAME

2. STREET ADDRESS

2. CITY, ST, ZIP

☐ Change ☐ Addition

3. NAME

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35. STREET ADDRESS

35. CITY, ST, ZIP

☐ Change ☐ Addition

SIGNATURE:

Karen Semel
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR