

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90080 039 ***150.00

DOCUMENT # **L54949**

1. Corporation Name

MAR-TECH ENGINEERING, INC.

Principal Place of Business

**1432 ST JOHNS BLUFF
JACKSONVILLE FL 32211
US**

Mailing Address

**1432 ST JOHNS BLUFF
JACKSONVILLE FL 32211
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/05/1990

4. FEI Number

59-3032161

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip **32225** Country

28 Zip **32225** Country

24 **32225** **25**

29 **32225** **30**

9. Name and Address of Current Registered Agent

**ROSENBERGER, DARYL C
1432 ST JOHNS BLUFF RD N
JACKSONVILLE FL 32211 32225**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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 applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **P**
ROSENBERGER, C. DARYL
STREET ADDRESS **6890 CRYSTAL LAKE RD**
CITY-ST-ZIP **STARKE FL**

TITLE ☐ DELETE

NAME **EVP**
SAUM, RICHARD W.
STREET ADDRESS **12919 HUNTLEY MANOR DR**
CITY-ST-ZIP **JACKSONVILLE FL**

TITLE ☐ DELETE

NAME **VP**
WILLIS, RICHARD
STREET ADDRESS **422 - 6TH AVE**
CITY-ST-ZIP **JACKSONVILLE FL**

TITLE ☐ DELETE

NAME **VP**
HAWKS, JAMES
STREET ADDRESS **PO BOX 1624 N/A**
CITY-ST-ZIP **JACKSONVILLE FL**

TITLE ☒ DELETE

NAME **VP**
PATELA, JOHN
STREET ADDRESS **301 CARAVAN CIR #208**
CITY-ST-ZIP **JACKSONVILLE FL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☒ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

KEYSTONE HEIGHTS, FL. 32091

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 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 Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **X**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

EVP 4-26-99 704-720082

Date

Daytime Phone #

CR2E034 (11/98)