

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 13 AM 10:17

DOCUMENT # L67084 (8)

1. Corporation Name

MIC MICROTROL, INC.

Principal Place of Business

7575 DR PHILLIPS BLVD
STE 310
ORLANDO FL 32819

Mailing Address

7575 DR PHILLIPS BLVD
STE 310
ORLANDO FL 32819

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/23/1990

3a. Date of Last Report

10/11/1994

4. FEI Number

59-3005626

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

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

HARGADON, E. WADE
7575 DR PHILLIPS BLVD
STE 310
ORLANDO FL 32819

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 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 date of appointment)

(Signature typed or printed name of registered agent and date of appointment)

(Date)

12. OFFICERS AND DIRECTORS

TITLE	DV
NAME	FADEM, J.J.
STREET ADDRESS	111 N ORANGE, STE 800
CITY ST ZIP	ORLANDO FL
TITLE	VCH
NAME	FADEM, J.J.
STREET ADDRESS	111 N ORANGE, STE 800
CITY ST ZIP	ORLANDO FL
TITLE	D
NAME	NEDER, GEORGE
STREET ADDRESS	85 W MILLER STE. 104
CITY ST ZIP	ORLANDO FL
TITLE	DST
NAME	HARGADON, E. WADE
STREET ADDRESS	7575 DR PHILLIPS BLVD
CITY ST ZIP	ORLANDO FL
TITLE	DP
NAME	ZAGNOLI, ROLAND C.
STREET ADDRESS	7575 DR PHILLIPS BLVD
CITY ST ZIP	ORLANDO FL
TITLE	DV
NAME	HARRELL, ROBERT M.
STREET ADDRESS	111 N ORANGE AVE
CITY ST ZIP	ORLANDO FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY ST ZIP	
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY ST ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY ST ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY ST ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY ST ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY ST ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and drawn and ready for the assumption stated in Sections 119.07(3)(b), 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. I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 117, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED AGENT OR DIRECTOR

AGENT

1/11/95

407-351-8674