

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000072799

1. Entity Name
M.P. TECHNOLOGIES, INC.



FILED

04 APR -5 AM 8:08

Principal Place of Business
1699 REDWOOD GROVE TERR
LAKE MARY, FL 32746

Mailing Address
1699 REDWOOD GROVE TERR
LAKE MARY, FL 32746

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01242004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3744067

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SENNELLO, LOUIS
1699 REDWOOD GROVE TERR
LAKE MARY, FL 32746

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3-4-04

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME SENNELLO, LOUIS
STREET ADDRESS 1699 REDWOOD GROVE TERR
CITY-ST-ZIP LAKE MARY, FL 32746

TITLE STD
NAME SENNELLO, JOAN
STREET ADDRESS 1699 REDWOOD GROVE TERR
CITY-ST-ZIP LAKE MARY, FL 32746

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

800032876718
04/15/04--01043--001 **150.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

LOUIS SENNELLO

3/31/04

Date

Daytime Phone #