2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000013785

Entity Name

MTS MARINE TECHNOLOGY SUPPLY, INC.



FILED Apr 30, 2004 8:00 am Secretary of State

04-30-2004 90393 031 ***150.00

Principal Place of Business Mailing Address					Ì						
8513 N.W. 6	8TH STREET	8513 N.W. 68TH STREET									
MIAMI, FL 3:	3166	MIAMI, FL 33166 .									
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		T									
2. Principal Place of Business 3. Mailing Addre			ess								
Cuita Aut	# ota	Cuito Ant # ata	Suite, Apt. #, etc.								
Suite, Apt.	#, etc.	Suite, Apr. #, etc.				01262004	Chg-P	CR2E0	34 (10/03)		
City & State	a a	City & State				4. FEI Numbe	or .		- An	plied For	
Only a Olaro		0.1, 0.0.0.0	.,			75-2993318 Not Applicable					
Zip Country		Zip	Zip Coun						\$8.75 Add		
,						5. Certificate of Status Desired Fee Required					
	·			7. Name and	Address of New	Registered /	\gent				
Magazadari nag "Mari da mari na ga "Mari Alban dari da di da					Name						
GOES, MARIA E					Street Address /D.O. Rev. Number is Not Assertable)						
18123 SW 20TH STREET				Street Address (P.O. Box Number is Not Acceptable)							
MIRAMAR						,					
							·		T- :-:		
				City				FL	Zip Cod	9	
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 of printed name of registered agent	and title if applicable. (NOT	E: Registere	d Agent signature	required	wnen reins(ating)		DATE			
	in the second se										
FILE NOWILL FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be											
After Ma	ay 1, 2004 Fee will be \$550.	00 Trust Fund Cont	ribution.	. 🗆	Adde	ed to Fees					
10.	OFFICERS AND DIRECTORS					ADDITIONS/	CHANGES TO OF	EICEDS AND	DIRECTOR	2 INI 1.1	
TITLE	PSD :	·		E	ADDITIONS/CHANGES TO OFFICERS AND DIR				Change	☐ Addition	
. NAME	GOES, MARIA E	☐ Delete Ti							☐ Change	MODITION	
STREET ADDRESS	18123 S.W. 20TH STREET			EET ADDRESS							
CITY-ST-ZIP	MIRAMAR FL 33029	* ·		-ST-ZIP						:	
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CITY-ST-ZIP			CITY	-ST-ZIP				13	1 /21 v		
12. hereby	certify that the information supplied with	this filing does not qualify fo	r the exe	emption state	d in Sec	ction 119.07(3)(i), Florida Statute:	s. I further cer	tify that the in	nformation	
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.											