


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 06, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P0300071916</b>	
1. Entity Name MITSC INC..	

Principal Place of Business 4936 DEWEY ROSE COURT TAMPA, FL 33624	Mailing Address 4936 DEWEY ROSE COURT TAMPA, FL 33624
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01152008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 58-2674505	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

SILAS, FRANK E SR.  
 4936 DEWEY ROSE COURT  
 TAMPA, FL 33624

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	F/SE MCPHERSON, SAMUEL 5005 MELROW COURT TAMPA, FL 33624
TITLE NAME STREET ADDRESS CITY-ST-ZIP	R/SE SILAS, BARBARA A 4936 DEWEY ROSE COURT TAMPA, FL 33624
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO INGHRAM, CLINTON SR 7232 HAMMET ROAD TAMPA, FL 33647
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES SILAS, FRANK E SR 4936 DEWEY ROSE COURT TAMPA, FL 33624
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CHESTER, FRANK 9723 BELVEDERE DRIVE TAMPA, FL 33584
TITLE NAME STREET ADDRESS CITY-ST-ZIP	E/DE TAYLOR, CALVIN 3298 CANDACE DRIVE ATLANTA, GA 39316

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 02/15/08-80029-003 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:** *Clinton Inghram* CLINTON INGRAM 02-03-08 (813) 9799295

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #