

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000098457

Entity Name: M. T. H. SERVICES, INC.

**FILED**  
**Mar 05, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

629 SW 32ND TERR  
CAPE CORAL, FL 33914

**New Principal Place of Business:**

**Current Mailing Address:**

629 SW 32ND TERR  
CAPE CORAL, FL 33914

**New Mailing Address:**

FEI Number: 20-5297026

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HAWRA, MONIKA  
629 SW 32ND TERR  
CAPE CORAL, FL 33914 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: HAWRA, MONIKA  
Address: 629 SW 32ND TERR  
City-St-Zip: CAPE CORAL, FL 33914

Title: VP  
Name: HAWRA, TOMASZ  
Address: 629 SW 32ND TERR  
City-St-Zip: CAPE CORAL, FL 33914

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: TOMASZ HAWRA

VP

03/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date