

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 08, 2007 08:00 AM
Secretary of State

DOCUMENT # P31772

1. Entity Name
MEDIATECH, INC.



Principal Place of Business

**829 CARSWELL AVE
HOLLY HILL, FL 32117 US**

Mailing Address

**829 CARSWELL AVE
HOLLY HILL, FL 32117 US**



03012007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3006234

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**MARKETTE, FRANCIS N PRES
1759 TRIBUTORY LANE
PORT ORANGE, FL 32128-4051**

**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 _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	VPS
NAME	GALLO, LOUIS C J
STREET ADDRESS	1893 BAYVIEW DR
CITY-ST-ZIP	NEW SMYRNA BEACH, FL 32168
TITLE	PT
NAME	MARKETTE, FRAN
STREET ADDRESS	1759 TRIBUTORY LANE
CITY-ST-ZIP	PORT ORANGE, FL 321284051
TITLE	VP
NAME	CURLEY, KEVIN
STREET ADDRESS	2729 RUNNING SPRINGS LOOP
CITY-ST-ZIP	OVIEDO, FL 32765
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000659945
03/19/07-80006-025 150.00

**DO NOT WRITE
IN THIS SPACE**

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:

Markette

Fran Markette

3/2/07

386-258-9958

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #