

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 20 1996 8:00 am
Secretary of State

DOCUMENT # **P93000021166 (2)**

1. Corporation Name

MARATECH CORPORATION

Principal Place of Business

**8723 TEMPLE TERRACE HWY.
TAMPA FL 33637**

Mailing Address

**8723 TEMPLE TERRACE HWY.
TAMPA FL 33637**



3. Date Incorporated or Qualified
03/22/1993

3a. Date of Last Report
04/11/1995

2. Principal Place of Business

2a. Mailing Address

21 **1455 W Busch Blvd**

26 **1455 W Busch Blvd**

4. FEI Number
65-0406777

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 **PO Box 280340**

27 **PO Box 280340**

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

City & State

City & State

23 **Tampa FL**

28 **Tampa FL**

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

Zip Country

Zip Country

24 **33682-0340** 25

29 **33682-0340** 30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KARVONEN, DANIEL S
8873 ORANGE OAKS CIR
TAMPA FL 33637**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

1455 W Busch Blvd

83 **PO Box 280340**

84 City **Tampa**

85 Zip Code **FL 33682-0340**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME **CEO**
STREET ADDRESS **KARVONEN, DANIEL S**
CITY-ST-ZIP **8723 TEMPLE TERRACE HWY. TAMPA FL**

1.1 TITLE ☒ Change ☐ Addition

TITLE ☐ DELETE
NAME **P**
STREET ADDRESS **KANE, LESTER E**
CITY-ST-ZIP **12848 GOODWOOD BLVD. BATON ROUGE LA 70815**

1.2 NAME
1.3 STREET ADDRESS **1455 W Busch Blvd**
1.4 CITY-ST-ZIP **Tampa, FL 33682-0340**

TITLE ☐ DELETE
NAME **CFO**
STREET ADDRESS **JOHNSON, DUANE F**
CITY-ST-ZIP **PO BOX 4009 MANKATO MN**

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP **56002-4009**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CFO

3/13/96

507/386-140

CR2E034 (12/95)