2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P94000029430

1. Entity Name M.T.H., INC.

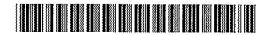


Principal Place of Business

1266 JACARANDA BLVD VENICE, FL 34292 Mailing Address

1266 IACARANDA BLVD VENICE, FL 34292

FILED Mar 15, 2004 08:00 AM Secretary of State



02022004

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-0489799

Applied For Not Applicable

5. Certificate of Status Desired

-9-04

\$8.75 Additional Fee Required

Daytime Phone #

5. Name and Address of Current Registered Agent

SIGNATURE AND TYPED OR PRINTED NAME

SAPA, RICHARD D ESQ 2033 MAIN ST SUITE 303 SARASOTA, FL 34237

SIGNATURE:

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						
FiLE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	{##00000087265 #3/15/84-80004-011 150.00	
10.	OFFICERS AND DIREC	CTORS	J			
TITLE Wasse Street adoress City-St-Zip	D MAKRODIMITRAS, CHRISTOS 1266 JACARANDA BLVD VENICE, FL 34292					
TITLE NAME STREET ADDRESS CHY-ST-ZIP	D MAKRODIMITRAS, ANASTASIA P 1266 JACARANDA BLVD VENICE, FL 34292				·	
Title Name Street address City-St-Zip				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN 7	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
title Name Street address City-St-Zip	\wedge				***	·
12. I hereby certify that the information supplies with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and securific 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 of trustees employered by effective the 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 thris like employered.						

G OFFICER OR DIRECTOR