FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

May 01 1997 8:00am

Secretary of State

4/12/02 /02 025-8211

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P95000051795 (9)

MCC TRANSPORTATION TECHNOLOGIES, INC.

Principal Place of Business Mailing Address							81				
12421 N. FLORIDA AVENUE SUITE C-200 TAMPA FL 3961\$ 2		SUITE C	12421 N. FLORIDA AVENUE SUITE C-200 TAMPA FL 33612-4220								
						3. Date In 07/05/	corporated or Qualified	3a. Date of 07/08/		port	
2. Principal Place of Business 2e. Mailing Ad 21			ing Address	.ddress			mber 3 26411	Applied For Not Applicable			
Sulte, Apt. #, etc. Suito, Apt. # 22 27			o, Apt. #, etc.	#, etc.			ate of Status Desired	\$	8.75 A		
City & State City & State 28			& State	State			Campaign Financing	Г	\$5.00 Added to		
Zip 24 336	Country 25	Z(p		Country 30		8. This co	rporation has liability for	intangible tax	under s.		
	9. Name and Address of Currer						end Address of New Re				
HAY	KENNETH			81	Name						
12421 N. FLORIDA AVENUE SUITE C-200			82	Street	Address (P.O. Box	Number is Not Acceptat	ole)				
TAMPA FL 3361\$ 2				83							
				84	City				5 Zip C		
SIGNATURE	to the provisions of Sections 607.050 agistered agent, or both, in the State in familiar with, and accept the oblig	est and the appli	cable. (NOTE	. Registered Age		gnistation norther existence	4/23	197 DATE			
12.	OFFICERS AN	D DIRECTOR	S DELETE	13.		DVST	NS/CHANGES TO OFFIC		Change		
TITLE NAME	WALTER, MARK A		C) becare	1.1 TITLE		DAY VEA	UNETH W.		Change	⊠ Addition	
STREET ADDRESS 12421 N. FLORIDA AVENUE STE. C-220			1.2 NAME HA		12421 AL	VNETH W. FLORIDA A	NENUE	STE	E C 220		
				1.3 STREET ADDR		TAMPA	FL 336	17		}	
CITY-ST-ZIP TITLE	DVST		⊠ DELETE	21 THLE	1 - ZIP	[/cr-cp //	1 4 500		Change	Addition	
NAME	ALEXANDER, R. KENT			2.2 NAME					onango		
STREET ADDRESS	12421 N. FLORIDA AVENUE S' TAMPA FL 3361\$ 2	TE. C-220		23 STREET		·					
CITY-ST-ZIP TITLE	TAMPA PL 33019 Z		DELETE	2 4 CHY-1	S1 - ZIP				Change	Addition	
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NAME				4.2 NAME					Ottorigo	La Addition	
STREET ADDRESS				4.3 STREET	ADDRESS					}	
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NAME				6.2 NAME		ļ			-		
STREET ADDRESS				6.3 STREET	ADDRESS						
CITY OT 7ID				CA OITY C	* ***						

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 12 or Block 12 or on an attachment with an address.