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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #	P96000079637	(0)

MANG	OTECH, INC.			L CERTICALES ME ARMA BASIA BERGA FRANCESCOS	R CERTA TAMA OTTOR TOTAL CERT CREE
1	ace of Business	Mailing Address			
200 E DAVIS TAMPA FL 3		209 E DAVIS BLVD TAMPA FL 33606-3728			
				3. Date Incorporated or Qualified 3a 09/23/1996	Date of Last Report
├ ─┐ '	Place of Business	2a. Mailing Address		4. FEI Number 3404868	Applied For
Suite, Ap	t. #, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	Not Applicable \$8.75 Additional
City & St	ato	City & State			Fee Required
23	giv.	28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for intang	
24	25 9. Name and Address of Cu	29	30	Florida Statutes	
10	ORGENSEN, SCOTT E	anent negratored Agent	81 Name	10. Native and Address of New Pregiste	new Agent
	99 E DAVIS BLVD		82 Street Ad	dress (P.O. Box Number is Not Acceptable)	
	AMPA FL 33606			Across (1.10. Box Williams)	
			83		
			84 City		FL 85 Zip Code
11 Pursuar	at to the provisions of Sections 607	7 0502 and 607 1508. Florida Statu	ites, the above-pamed co	orporation submits this statement for the purpo ration's board of directors. I hereby accept the	
agent. I StGNATURE	Signature, typed or perted name of register	ed agent and title if applicable. (NC	PTE: Registered Agent signature re	quired when reinstating) DA	ATE
12.		S AND DIRECTORS DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition
TITLE	JORGENSEN, SCOTT E		1.2 NAME		C overibe C verified
STREET ADDRESS	AAA BANNAR ALE FA		1.3 STREET ADDRESS		· ·
CITY - ST - ZIP	TAMPA FL 33606	1	1,4 CHTY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		Change Addition
NAME	PATIBANDLA, ANIL	.014	2 2 NAME		
STREET ADDRESS	s 7501 ULMERTON RD APT LARGO FL 33771	214	2.3 STREET ADDRESS		
TITLE	D-1100 / L 00// 1	DELETE	2. 4 CITY - ST - ZIP 3.1-TITLE		Change Addition
NAME	NEMANI, BALA		3.2 NAME		· ·
STREET ADDRESS	s 7501 ULMERTON RD APT	214	3.3 STREET ADDRESS	•	'
CITY-ST-ZIP	LARGO FL 33771		3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME expect apposes	c		4.2 NAME 4.3 STREET ADDRESS		
STREET ADDRESS	3		4.3 STREET ADDRESS		
TIFLE		DELETE :	5.1 T(TLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS	S		5.9 STREET ADDRESS		
C/TY - ST - ZIP		· · · · · · · · · · · · · · · · · · ·	5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME	ı		62 NAME		

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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 13 if chapted, or on an attachment with an address.

FILED

Apr 18 1997 8:00am

Secretary of State