

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90547 018 ***150.00

DOCUMENT # P97000026551

1. Entity Name
MTC, INC.



Principal Place of Business
8000 SEMINOLE BLVD.
STE 1
SEMINOLE, FL 33772

Mailing Address
8000 SEMINOLE BLVD.
STE 1
SEMINOLE, FL 33772



04232004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-3441918

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

KERBO, MARK
8000 SEMINOLE BLVD STE #1
SEMINOLE, FL 33772

**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 re-registering)

DATE

**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**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME KERBO, MARK
STREET ADDRESS 8000 SEMINOLE BLVD, STE 1
CITY-ST-ZIP SEMINOLE, FL 33772

TITLE VD
NAME KERBO, ANTHONY
STREET ADDRESS 8000 SEMINOLE BLVD., STE 1
CITY-ST-ZIP SEMINOLE, FL 33772

TITLE STD
NAME KERBO, CHRIS
STREET ADDRESS 8000 SEMINOLE BLVD., STE 1
CITY-ST-ZIP SEMINOLE, FL 33772

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I 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 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:

Mark Kerbo **MARK KERBO**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/04
Date

727-319-8706
Daytime Phone #