
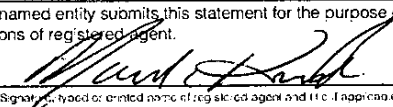
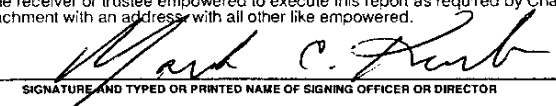


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 18, 2005 8:00 am**  
**Secretary of State**

04-18-2005 90324 004 \*\*\*150.00

<b>DOCUMENT # P97000026551</b> 1. Entity Name <b>MTC, INC.</b>																																																																																																							
Principal Place of Business <b>8000 SEMINOLE BLVD. STE 1 SEMINOLE, FL 33772</b>		Mailing Address <b>8000 SEMINOLE BLVD. STE 1 SEMINOLE, FL 33772</b>																																																																																																					
2. Principal Place of Business <b>8000 SEMINOLE BLVD. SUITE 5 SEMINOLE, FL</b>		3. Mailing Address <b>8000 SEMINOLE BLVD. SUITE 5 SEMINOLE, FL</b>																																																																																																					
Suite, Apt. #, etc. <b>SUITE 5</b>		Suite, Apt. #, etc. <b>SUITE 5</b>																																																																																																					
City & State <b>SEMINOLE, FL</b>		City & State <b>SEMINOLE, FL</b>																																																																																																					
Zip <b>33772</b>		Zip <b>33772</b>																																																																																																					
Country 		Country 																																																																																																					
4. FEI Number <b>59-3441918</b>		Applied For <input type="checkbox"/> Not Applicable																																																																																																					
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required																																																																																																					
6. Name and Address of Current Registered Agent  <b>KERBO, MARK 8000 SEMINOLE BLVD STE #1 SEMINOLE, FL 33772</b>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>																																																																																																					
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:  DATE: <b>4/15/05</b> <small>Signature of board or elected agent and if applicable, registered agent. (NOTE: Registered Agent signature required when registering)</small>																																																																																																							
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$350.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees																																																																																																					
<div style="display: flex;"> <div style="flex: 1;"> <b>10. OFFICERS AND DIRECTORS</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">PD KERBO, MARK</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>8000 SEMINOLE BLVD, STE 1</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>SEMINOLE, FL 33772</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>VD KERBO, ANTHONY</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>8000 SEMINOLE BLVD., STE 1</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>SEMINOLE, FL 33772</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>STD KERBO, CHRIS</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>8000 SEMINOLE BLVD., STE 1</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>SEMINOLE, FL 33772</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table> </div> <div style="flex: 1;"> <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/></td> </tr> <tr> <td>NAME</td> <td>8000 SEMINOLE BLVD. STE 5</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td>Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/></td> </tr> <tr> <td>NAME</td> <td>8000 SEMINOLE BLVD. STE 5</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td>Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/></td> </tr> <tr> <td>NAME</td> <td>8000 SEMINOLE BLVD. STE 5</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td>Change <input type="checkbox"/> Addition <input type="checkbox"/></td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td>Change <input type="checkbox"/> Addition <input type="checkbox"/></td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> </tr> </table> </div> </div>				TITLE	PD KERBO, MARK	<input type="checkbox"/> Delete	NAME	8000 SEMINOLE BLVD, STE 1		STREET ADDRESS	SEMINOLE, FL 33772		CITY-ST-ZIP			TITLE	VD KERBO, ANTHONY	<input type="checkbox"/> Delete	NAME	8000 SEMINOLE BLVD., STE 1		STREET ADDRESS	SEMINOLE, FL 33772		CITY-ST-ZIP			TITLE	STD KERBO, CHRIS	<input type="checkbox"/> Delete	NAME	8000 SEMINOLE BLVD., STE 1		STREET ADDRESS	SEMINOLE, FL 33772		CITY-ST-ZIP			TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>	NAME	8000 SEMINOLE BLVD. STE 5	STREET ADDRESS		CITY-ST-ZIP		TITLE	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>	NAME	8000 SEMINOLE BLVD. STE 5	STREET ADDRESS		CITY-ST-ZIP		TITLE	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>	NAME	8000 SEMINOLE BLVD. STE 5	STREET ADDRESS		CITY-ST-ZIP		TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>	NAME		STREET ADDRESS		CITY-ST-ZIP		TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>	NAME		STREET ADDRESS		CITY-ST-ZIP	
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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:  DATE: <b>4/15/05</b> 727-319-8206 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>																																																																																																							

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04152005 Chg-P CR2E034 (10/03)