May 10, 1999 8:00 am Secretary of State

05-10-1999 90221 029 \*\*\*150.00



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000047002

1. Corporation Name

MEDIA TECH SERVICES, INC.

Principal Place of Business Mailing Address									
9724 SW 156 CT. 9724 SW 156 CT. MIAMI FL 33196 MIAMI FL 33196									
MIAMI FE 33130						DO NOT WRITE IN THIS SPACE .			
						3. Date Incorporated or Qualifed			
\						05/27/1997			
2. Principal Place of Business 2a. Mailing Addre						4. FEI Number		App	lied For
21		26	6			NOT APPLICABLE		Not	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			dditional
22		27				5. Certificate of Status Desired	F	ee Rec	luired
City & Stat	e	City & State				6. Election Campaign Financing		5.00 A	,
23		28				Trust Fund Contribution	Ar	dded to	Fees
Zip	Country	Zip	Count	try		8. This corporation owes the current year In			<b>C</b> 7
24	25	29	30			Personal Property Tax.	☐Ye		<u>M</u> No
	9. Name and Address of Current	Registered Agent		<del></del> T	Manage	10. Name and Address of New Registered	Agent		
DAC	CHALLE DENNIC		10	31	Name				
PASCHALIS, DENNIS 9724 SW 156 CT.				32	Street Addre	ess (P.O. Box Number is Not Acceptable)			
9/24 5W 156 CT. MIAMI FL 33196				_		<u></u>			
MIAN	AI FL 33190		l <sup>8</sup>	33					
			8	34	City		85	Zip C	ode
			<u></u> ]			<u> </u>		<del></del>	
office of t	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	l Florida. Such change was at	ithorized t	DV (	-named corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the appo	t changi intment	ng its i as reg	registered jistered
SIGNATURE						d when reinstating) DATE			
Signature, typed or printed name of registered agent and title if applicable (NOTE: Regis					signature required	d when reinstating)  ADDITIONS/CHANGES TO OFFICERS A	ND DIR	ECTO	2S IN 12
12.	OFFICERS AND DIRECTORS  Delete					ADDITIONS/CHANGES TO OFFICERS A			Addition
TITLE	P DACCHALIC DENNIC		1.1 TITLE	_				. 5.	
NAME	PASCHALIS, DENNIS 9724 SW 156 CT	. 1			ADDDCCC		,	port .	
STREET ADDRESS		D/S/			ADDRESS				
CITY-ST-ZIP	MIAMI FL 33196	DELETE/	21 TITU	_	-ZIP		<del>/                                      </del>	nange	Addition
TITLE		LI DELETE							
NAME			2.2 NAM						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP		DELETE	2.4 CIT	_	1-ZIP		Cr	nange	Addition
TITLE	,	_ Delle le							
NAME			3 2 NAM		4BBB500				
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP		☐ DELETÉ	3.4. CITY 4.1 TITL	_	1-ZIP			hange	Addition
TITLE	/	□ occese							
NAME			4. 2 NAA						
STREET ADDRESS			4.3 STRI	ÉET	ADDRESS	/			

14. 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 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, with all other like empowered.

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

5.3 STREET ADDRESS

63 STREET ADDRESS

6.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

**SIGNATURE:** 

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

BEDDIS

DELETE

☐ DELETE

☐ Change

Change

☐ Addition

☐ Addition