

2004 FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 09, 2004 8:00 am
Secretary of State

08-09-2004 90013 016 ***150.00

DOCUMENT # P99000038074

1. Entity Name

NMT ENTERPRISES, INC.



Principal Place of Business

1732 TIMOCUAN WAY
LONGWOOD FL 32750

Mailing Address

1732 TIMOCUAN WAY
LONGWOOD FL 32750

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3572780

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TILIAKOS, NICHOLAS
1732 TIMOCUAN WAY
LONGWOOD, FL 32750

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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]

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

7-31-04

FILE NOW!!! FEE IS \$550.00

DUE BY September 8, 2004

Make Check Payable to Florida Department of State

S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. ☒

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO TILIAKOS, NICHOLAS M 1732 TIMOCUAN WAY LONGWOOD FL 32750	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 or without other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Attachment
44051735

To whom it may concern,

Enclosed is a check for \$150.

I requested document #99000038074 in April but never received it. I enclosed the first notice your office sent me as evidence that I had ripped the request notice and mailed it...but never received the form.

I appreciate that you recommend we pay thru the computer, but felt uneasy about paying by credit card as I had problems with several hackers during the winter, who had hacked into my computer, stolen my credit card numbers on several occasions and used them.

Please accept this explanation and excuse me from the penalty.

Thanks for your understanding,

Nicholas M. Tiliakos
CEO
NMT Enterprises

DO NOT DISCARD NOTICE

2004 Annual Report due by May 1, 2004

\$400 penalty fee may apply if late.

The Annual Report (AR) notification process has changed.
This postcard is your reminder that it is now time to file your 2004 AR.
To expedite filing, we offer the following filing options:

OPTION 1 - File Online (recommended)



- Visit www.sunbiz.org. It's faster and easier!
 - Available 24 hours a day, 7 days a week
 - Mastercard, Visa or American Express accepted
- Free public access to the Internet is available at your local public library.

OPTION 2 - Submit form and check by mail



- Immediately download preprinted form from www.sunbiz.org.
 - No credit card information required
- OR
- Return attached postcard to receive form by mail
 - Allow 7-10 business days for delivery