2005 FOR PROFIT CORPORATION

SIGNATURE:

Secretary of State **ANNUAL REPORT** 04-05-2005 90048 042 ***150.00 **DOCUMENT # P99000100254** 1. Entity Name M.P.T. SERVICES, INC. Principal Place of Business Mailing Address 1085 E. 4TH AVE., STE B 1200 NW 78TH AVE., STE 216 HALEAH, FL 33010-1055 E 40h AVENUE MIAMI, FL 33126 HALKAH, FL. 13010 01082005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0964038 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ACERO, MARTHA DO NOT WRITE 1005 E. 4TH AVE., STE B-10st E 4th AVENUE HAVEAH, FC. 33010 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME ACERO, MARTHA C ION E 4th AVENUE 1005 E. 4TH AVE., STE B STREET ADDRESS CITY-ST-ZIP HIÀLEAH, FL-33010-HIALEAH, FL. 33010 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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 withat address, withful other like empowered.

required by Chapter 607, Florida Statutes; and that my name appears in the sequence of the seq

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FILED Apr 05, 2005 8:00 am