

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L07022

**Entity Name:** M A S SUPPORT SYSTEMS, INC.

**Current Principal Place of Business:**

1602 W. SLIGH AVE  
STE 200  
TAMPA, FL 33604

**Current Mailing Address:**

1602 W. SLIGH AVE  
STE 200  
TAMPA, FL 33604 US

**FEI Number:** 59-2963786

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

VALDEZ, EVELIO U., JR.  
10505 ROCHESTER WAY  
TAMPA, FL 33626 US

*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.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title PSD  
Name VALDEZ, EVELIO U., JR.  
Address 1602 W. SLIGH AVE  
City-State-Zip: TAMPA FL

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** EVELIO U VALDEZ JR.

**PRESIDENT**

**01/09/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date