

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J40691 (4)

1. Corporation Name

M4 DATA, INC.



Principal Place of Business

**3815 N US HWY 1
BLDG 118
COCOA FL 32926**

Mailing Address

**3815 N US HWY 1
BLDG 118
COCOA FL 32926**

2. Principal Place of Business

21 4451 Enterprise CT

Suite, Apt. #, etc.

22 Suite B

City & State

23 Melbourne, FL 32934

Zip

24 32934

Country

25 USA

2a. Mailing Address

26 4451 Enterprise CT

Suite, Apt. #, etc.

27 Suite B

City & State

28 Melbourne, FL

Zip

29 32934

Country

30 USA

3. Date Incorporated or Qualified
11/03/1986

3a. Date of Last Report
02/21/1995

4. FEI Number
59-2735743

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**MORIN, ALAN M
3815 N US 1 BLDG 118
COCOA FL 32926**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Secretary of Corporation)

(Signature of Registered Agent or Secretary of Corporation)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME **PD EBENEZER, DUKE R.**
STREET ADDRESS **HORNSEY, BACK LN**
CITY-STATE-ZIP **WESTBURY SUBMENDIP, UK**

TITLE ☐ DELETE
NAME **VD HUNTINGDON, DAVID C.**
STREET ADDRESS **68 SEA VIEW ROAD**
CITY-STATE-ZIP **HAYLING ISLAND, UK**

TITLE ☐ DELETE
NAME **ST HUNT, NIGEL L.**
STREET ADDRESS **18 GARDEN CLOSE**
CITY-STATE-ZIP **HOOK, HAMPSHIRE, UK**

TITLE ☐ DELETE
NAME **T MORIN, ALAN M.**
STREET ADDRESS **3815 N. US HWY 1, STE 118**
CITY-STATE-ZIP **COCOA FL**

TITLE ☐ DELETE
NAME **S POOLE, WILLIAM M.**
STREET ADDRESS **233 PEACHTREE ST., #1400**
CITY-STATE-ZIP **ATLANTA GA**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-STATE-ZIP

2. TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-STATE-ZIP

3. TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-STATE-ZIP

4. TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-STATE-ZIP

5. TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-STATE-ZIP

6. TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 or person in power to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ALAN M MORIN

20 JAN 96

407 255-0666

CR2E034 (12/95)