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PROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G52026

(3)

FILED Apr 24 1998 8:00am Secretary of State

TEJERA MICROSYSTEMS ENGINEERING, INC. Principal Place of Business Mailing Address P.O. BOX 340608 P.O. BOX 340608 TAMPA FL 33694 TAMPA FL 33694 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/01/1983 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-2312124 26 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing []23 28 Trust Fund Contribution Added to Fees Zip Country Ζφ Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes ☐ No 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent TEJERA, ALBERT R 15711 COUNTRY LK. DR. 82 Street Address (P.O. Box Number is Not Acceptable) TAMPA FL 33624 83 City Zip Code 85 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, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CR2E034 (10/97 12. OFFICERS AND DIRECTORS 13. Change Addition DELETE TITLE 1 1 THE Tejera, albert r NAME 1.2 NAME 15711 COUNTRY LAKE DR. STREET ADDRESS 1.3 STREET ADDRESS TAMPA FL 33624 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition 21 TIFLE TITLE TEJERA, PATSY R 22 NAME NAME 15711 COUNTRY LAKE DR. 2.3 STREET ADDRESS STREET ADDRESS TAMPA FL 33624 2.4 City-St-ZiP CITY-ST-ZIP DELETE 3.1 TITLE Change Addition TITLE NAME 3.2 NAME 3 3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3 4. CITY-ST-ZIP DELETE Addition TITLE 41 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-\$1-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 6 1 TITLE 62 NAME NAME 63 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 6.4 CITY-ST-ZIP

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 arrival 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 rective or trustee europears 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 on an attact high table in the corporation of the corporation of

SIGNATURE:

R. lepra 4-18-58 873-468-9510