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Mar 09 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998

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

DOCUMENT # **P94000060943 (5)**

1. Corporation Name
MODERN SILICONE TECHNOLOGIES, INC.

Principal Place of Business	Mailing Address
10741-D. ENDEAVOUR WAY LARGO FL 34647 US	10330 MULBERRY WAY LARGO FL 34647

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/18/1994

4. FEI Number: 59-3261955 ☐ 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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☑ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 10750 Endeavour Way	26 10750 Endeavour Way
22 Suite, Apt. #, etc. A	27 Suite, Apt. #, etc. A
23 City & State Largo Florida	28 City & State Largo Florida
24 Zip 33777 25 Country	29 Zip 33777 30 Country

9. **Name and Address of Current Registered Agent**

CORPORATION INFORMATION SERVICES INC.
1201 HAYS ST.
TALLAHASSEE FL 32301

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	OLSON, DAVID W		1.2 NAME		
STREET ADDRESS	10330 MULBERRY WAY		1.3 STREET ADDRESS		
CITY-ST-ZIP	LARGO FL 34647		1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	MORRIS, CHARLES H. O		2.2 NAME		
STREET ADDRESS	7796 ALISTER MACKENZIE DR.		2.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL 34241		2.4 CITY-ST-ZIP		
TITLE	P	☐ DELETE	3.1 TITLE		☑ Change ☐ Addition
NAME	TANDOURJIAN, MARC		3.2 NAME		
STREET ADDRESS	10741 D ENDEAVOUR WAY		3.3 STREET ADDRESS	10750 A Endeavour Way	
CITY-ST-ZIP	LARGO FL		3.4 CITY-ST-ZIP	33777	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (10/97)

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 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 empowered 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 attachment with an address.

SIGNATURE: _____ 2/28/98 (813)541-1700