2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P96000087179

Entity Name: STG AEROSPACE, INC

FILED Feb 18, 2005 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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3261 S.E. SLATER ST. 6043 NW 167 STREET STUART, FL 34997 SUITE A-14 US

MIAMI, FL 33015 US

Current Mailing Address: New Mailing Address:

3261 S.E. SLATER ST. STUART, FL 34997 6043 NW 167 STREET. SUITE A-14

MIAMI, FL 33015 US

FEI Number: 65-0801877 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GIRARD, GARY I GIRARD, MADAI C 3861 SW BIMINI CIRCLE 14422 ROSEWOOD ROAD MIAMI LAKES, FL 33014 PALM CITY, FL 34990

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: MADAI C. GIRARD 02/18/2005

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

GIRARD, GARY L Name: Name: GIRARD, GARY L 14311 SABAL DR 14422 ROSEWOOD ROAD Address: Address: City-St-Zip: MIAMI LAKES, FL 33014 US City-St-Zip: MIAMI LAKES, FL 33014 US

Title: VSTD Title: **VSTD** (X) Change () Addition () Delete

Name: GIRARD, MADALC Name: GIRARD, MADALC 14311 SABAL DR 14422 ROSEWOOD ROAD Address: Address: MIAMI LAKES, FL 33014 MIAMI LAKES, FL 33014 City-St-Zip: City-St-Zip:

() Delete Title: Title: CD () Change () Addition

LLEWELLYN, RODGER Name: Name: 91 CRACKEWELL ESPLANADE WESTCLIFF ON SEA Address: Address: City-St-Zip: ESSEX, UK 5508JJ, OC City-St-Zip:

Title: () Delete Title: () Change () Addition

STOKES, PETÉR Name: Name: Address: GLENWOOD COUNTY SCHOOL NORTH ELM NORFOLK Address: City-St-Zip: UK NR205LE. City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: MADAI C GIRARD D 02/18/2005