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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

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May 19 1997 8:00am

Secretary of State

0101820

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000049827 (4)

AJT-FLORIDA, INCORPORATED

appears in Block 12 or Block 13 if changed, or op

SIGNATURE:

SIGNATURE AND TYPED OR

Principal Flace of Business Mailing Address 101 GEORGE KING BOULEVARD 101 GEORGE KING BOLLEVARD CAPE CANAVERAL FL 32920-3305 CAPE CANAVERAL FL 32920 3. Date Incorporated or Qualified 3a. Date of Last Report 06/10/1996 El Number 59-3385637 2. Principal Place of Business 2a. Mailing Address Applied For 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 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Country Zπ 8. This corporation has liability for intangible tax under s. 199.032. Yes No 24 29 25 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent **B1** Name TERAN, ALFREDO J 808 WEST CENTRAL BOULEVARD Street Address (P.O. Box Number is Not Acceptable) CAPE CANAVERAL FL 32920 83 84 City 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. 96/6) DELETE Addition 1.1 TITLE Change THUE President NAME 1.2 NAME Teran, Alfredo 808 W. Central Blvd. 1.3 STREET ADDRESS STREET ADDRESS 1.4 CITY-ST-ZIP C-1Y - S1 - 7IP Cape Canaveral, FL 32920 DELETE Change Addition 2.1 TITLE THE Deeks, Peter C. 2.2 NAME NAME 2170 Reynard Place 2.3 STREET ADDRESS STREET ADDRESS Merritt Island, FL 32952 CHTY - ST - ZIP 2.4 CITY-ST-ZIP VP/Secretary DELETE ☐ Change Addition THE 3.1 TITLE Wood, Richard G. 32 NAME NAME 255 Banana Blvd. **33 STREET ADDRESS** STREET ADDRESS Merritt Island, FL 34. CITY-ST-ZIP CITY-ST ZIF DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME NAME Hargrove, Jr., Arthur STREET ADDRESS 1711 Waller Road 4.3 STREET ADDRESS CITY-ST-7IP Huntsville, AL 35801 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TATLE Treasurer 5.2 NAME NAME: Autery, Deborah L. 5.3 STREET ADDRESS STREET ADDRESS 5801 N. Atlantic Ave., #410 CHY-SI-ZIP 5.4 CITY-ST-ZIP Cape Canaveral, FL 32920 Addition 6.1 TITLE Change TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this Hing does of 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 of true empowered to execute this report as required by Charner 607, Florida Statutes; and that my name

with an address.