

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 14, 2006 08:00 AM
Secretary of State

DOCUMENT # F02000002026 1. Entity Name SHIELD ENGINEERING, INC.	
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Principal Place of Business 4301 TAGGART CREEK ROAD CHARLOTTE, NC 28208	Mailing Address 4301 TAGGART CREEK ROAD CHARLOTTE, NC 28208
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02012006 No Chg-P CRZE034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 56-0673937	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent ALLEN, MARK 7922 CAMINO CIR. MIAMI, FL 33143
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**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and not applicable

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

**110000467521
03/23/06 00054-006 150.00**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CS HAGER, HAMPTON C JR. 880 A1A BEACH BLVD., UNIT 6107 ST AUGUSTINE, FL 32080
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SMITH, JIM 5011 LINDSTRON DR. CHARLOTTE, NC 28226
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FROST, MIKE 406 HANES RIDGE ROAD MOORESBORO, NC 28114
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LUTZ, JACK 827 EAST MAIN ST. FOREST CITY, NC 28043
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ICENHOUR, GREG 1511 SWEETGUM LANE MATTHEWS, NC 28105
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HAGER, HAMPTON C III 15823 KELLY PARK CIRCLE HUNTERSVILLE, NC 28078

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Hampton C. Hager* *Hampton C. Hager* *2/25/06* *(714) 394-6913*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #