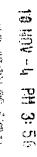
(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)			
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)	(Re	equestor's Name)	
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)			
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(Business Entity Name)	(Ci	ty/State/Zip/Phone	#)
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Special Instructions to Filing Officer:	Special Instructions to	Filing Officer:	
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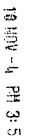
Office Use Only



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COVER LETTER

TO:	Amendment Section Division of Corporation	ıs					
CUDY	<i>የ</i> ድም.	Global Defe	ense Products, Inc.				
อบถม	ECT:	Name of C	orporation				
DOC	UMENT NUMBER:	525803					
The e	nclosed Statement of Cha	nge of Registered Offic	e/Agent and fee are submitted for filing.				
Please	return all correspondence	e concerning this matte	r to the following:				
		Satiris Fas	ssoulis				
		Name of Co	ntact Person				
		Global Defe	ense Products, Inc.				
	, 	Firm/C	отрапу				
20 Waterside Plaza, 33A							
		Ado	ress				
	•						
New York, NY 10010 City/State and Zip Code							
		City/State a	nd Zip Code				
		sfassoulis	@cic-international.com				
	E-mail add	ress: (to be used for t	future annual report notification)				
For fu	rther information concern	ning this matter please	call·				
10110	James Ch		212 689-9644				
	Name of Contac	et Person	at () Area Code & Daytime Telephone Number				
	. 141110 01 0011141	7010000	. Hou cour a Buy time . Coophone . (amou				
Enclos	sed is a \$35.00 check made	le payable to the Depar	tment of State.				
	Mailin Arrien	g Address: dment Section	Street Address: Amendment Section				
		on of Corporations	Division of Corporations				
	P.O. E	30x 6327	Clifton Building				
	Tallah	assee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301				

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

-	ovisions of sections 6 ge is submitted for a c				
•	to change its registere				
1. The name of the	e corporation:	Global	Defense Pro	ducts, Inc	•
2. The principal of	ffice address:	20 Wate	erside Plaza	, 33A	
		New You	rk, NY 10010		All and the second of the
3. The mailing add	dress (if different):	PO Box	533-		
		New Yor	k, NY 10011		
4. Date of incorpo	ration/qualification: _	02/14/1977	Document num	ber: <u>525803</u>	
	treet address of the cunent of State: (If resig		-	fice on file with th	ne
	Agents	s and Corpor	rations, Inc		
	300 Fi	fth Avenue	South, Suite	≥ 101-330	
_	Naples	, FL 34102	, , · · <u>.</u>		
6. The name and s (if changed):	street address of the no		(if changed) and /or	registered office	PH 3: 5
-		ou Rogers			
-	1936 Ap	opka Drive P.O. Box NOT	accentable		
	Middleb	urg, FL 320	-		
as changed will b	s of its registered off e identical. authorized by resolu board, or the corpor				
audiorized by the	2 country or the corpor	ation has been not		ssoulis,	
Signature	of an officer of director	_ 		typed name and title	resident
I hereby accept the I further agree to of my duties, and document is being corporation has it	he appointment as re comply with the pro I am familiar with a g filed merely to refl been notified in writi	gistered agent and wisions of all statu ind accept the oblig ect a change in the ing of this change.	l agree to act in this tes relative to the p gation of my positio registered office ac	capacity, roper and complon as registered a ddress, I hereby o	ete performance gent. Or, if this confirm that the
Mary	Ly Kogo	IN_) Date	
If signing on beh	alf of an entity:		, -	V 1000	
Tyſ	ed or Printed Name				

* * * FILING FEE: \$35.00 * * *