FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

FILED
1995 JUL 19 AM 10:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F93000001928 (1)

1. Corporation Name
VALENTEC INTERNATIONAL CORPORATION

DO NOT WRITE IN THIS SPACE.

Principal Place of Business	Mailing Address
3190 PULLMAN STREET COSTA MESA CA 92626 US	3190 PULLMAN STREET COSTA MESA CA 92626 US

3. Date Incorporated or Qualified: 04/22/1993
3a. Date of Last Report: 08/15/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / Country — 25 / Zip — 29 / Country — 30

4. FEI Number: 54-1658773 ☐ 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 has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
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	CP	1.1 TITLE	C/P/D	☒ Change ☐ Addition
NAME	ZUMMO, ROBERT A	1.2 NAME		
STREET ADDRESS	3190 PULLMAN STREET	1.3 STREET ADDRESS		
CITY-ST-ZIP	COSTA MESA CA	1.4 CITY-ST-ZIP		
TITLE	VT	2.1 TITLE	V/T/D	☒ Change ☐ Addition
NAME	MYERS, W. HARDY	2.2 NAME		
STREET ADDRESS	3190 PULLMAN STREET	2.3 STREET ADDRESS		
CITY-ST-ZIP	COSTA MESA CA	2.4 CITY-ST-ZIP		
TITLE		3.1 TITLE	S	☐ Change ☒ Addition
NAME		3.2 NAME	Sullivan, Paul	
STREET ADDRESS		3.3 STREET ADDRESS	3190 Pullman Street	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Costa Mesa, CA 92626	
TITLE		4.1 TITLE	Assistant Secretary	☐ Change ☒ Addition
NAME		4.2 NAME	Krumwiede, Kathy S.	
STREET ADDRESS		4.3 STREET ADDRESS	3190 Pullman Street	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Costa Mesa, CA 92626	
TITLE		5.1 TITLE	D	☐ Change ☒ Addition
NAME		5.2 NAME	Suozzi, Francis X.	
STREET ADDRESS		5.3 STREET ADDRESS	3190 Pullman Street	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Costa Mesa, CA 92626	
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 added, in connection with an address.

SIGNATURE: _____ 6-14-95 714/662-7766
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Kathy S. Krumwiede
Date — Daytime Phone #

0492078 FP