1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H57913

MELBOURNE TECHNICAL SERVICES, INC.

Principal Place of Business	Mailing Address
2255 VERMONT ST. WEST MELBOURNE FL 32904	2255 VERMONT ST WEST MELBOURNE

FILED Mar 06, 1999 8:00 am Secretary of State

03-06-1999 90068 002 ***150.00



WEST MELBOU	- · ·	WEST MELBOURNE FL 32904			DO NOT WRITE IN THIS SPA	CE			
					3. Date Incorporated or Qualifed 05/20/1985				
2 Principal Pl	ace of Business	2a. Mailing Address			4, FEI Number	Apı	lied For		
	lace of Busiless	26	¬ •				Applicable		
26 Suite, Apt. #, etc. Suite, Apt. #					\$		dditional		
					LE Caulifanta of Status Desired III	Fee Re			
22 27 City & State City & State					6. Election Campaign Financing	5.00	May Bo		
					1	Added to	-		
23 7in	Country	Zip	Countr	·	This corporation owes the current year Intangit				
Zip			_	,	Personal Property Tax.				
24	25 29 30 9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent					
	9. Name and Address of Currer	it Registered Agent	8	81 Name					
GLO	GER, JACKIE P.								
	•		8	2 Street Add	ress (P.O. Box Number is Not Acceptable)				
2255 VERMONT STREET									
WES	T MELBOURNE FL 32904		8	3					
			8-	4 City	5 5 1 8 8	5 Zip C	Code		
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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 age			ent signature require	ed when reinstating) DATE ADDITIONS (CHANGES TO CELLOEDS AND D	DECTO	TIC IN 12		
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND D	Change	Addition		
TITLE	PD	☐ DELETE	1.1 TITLE		Ц	Change			
NAME	Gloger, Jackie p.		1.2 NAME				ĺ		
STREET ADDRESS	2255 VERMONT ST.		1.3 STRE	ET ADDRESS	·		}		
CITY-ST-ZIP	West Melbourne FL		1.4 CITY-	ST-ZIP					
TITLE	ST	☐ DELETE	2.1 TITLE			Change	☐ Addition		
NAME	GLOGER, JACKIE P.	. 2.2 N		:			ľ		
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CITY-ST-ZIP			5.4 CITY-	ST-ZIP			}		
TITLE		☐ DELETE	6.1 TITLE			Change	Addition		
NAME			6.2 NAME				ì		
				ET ADDRESS					
STREET ADDRESS			64 CTTV	1			ł		

CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing 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 on an attachment with an address, with all other like empowered.

SIGNATURE: