## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT # H63394

(1)

HOLTEC (U.S.A.) CORPORATION

Principal	Place of Business	Mailing Addre	SS	<u></u>	···	
P.O. BO	DNEY ROAD. PLANT CITY.FL. 33567 K 2190 N FL 33509-9190	2802 SYDNEY ROAD, PLANT CITY.FL. 33567 P.O. BOX 2190 BRANDON FL 33509-9190			33567	DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  06/11/1985
21	oal Place of Business  Apt. #, etc	2a. Mailing Add 26 Suite, Apt		· -		4. FEI Number Applied For Not Applied For Not Applicable  5. Certificate of Status Desired \$8.75 Additional
22		27   City & State   28				Fee Required     Fee Required     Fee Required     S. Election Campaign Financing     Trust Fund Contribution     Added to Fees
7ip	Country 25 9. Name and Address of Curre	Zip 29 29	30	intry		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent
BURTON, STEVEN G 100 SOUTH ASHLEY DRIVE SUITE 2200 TAMPA FL 33602				81 82 83 84	Name Street Addr	ress (P.O. Box Number is Not Acceptable)  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 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change Addition SEIGLER, GERI L 1.2 NAME 2802 SYDNEY ROAD STREET ADDRESS 1.3 STREET ADDRESS PLANT CITY FL City-St-ZiP 1.4 CITY-ST-ZIP TITLE DELETE 21 TITLE Change Addition NAME RASHID, SAMAD S. 22 NAME 2802 SYDNEY ROAD STREET ADDRESS 23 STREET ADDRESS PLANT CITY FL CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition TITLE 3 1 11TLE NAME 32 NAME STREET ADDRESS **3.3 STREET ADDRESS** CITY-ST-ZIP 34. DITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TOLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE Change \_\_\_ Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. Thereby certify that the information supplied with this flow 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 supplements and including an 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 resiyour er missing improvement of execute this report as required by Chapter 607. Florida Statutes; and that my name agrees in Block 12 or Block 13 if changed, or on an other times with languages.

SIGNATURE:

CHY-SI-ZIP

CR2E034 (10/97)

**FILED** 

Mar 24 1998 8:00am

Secretary of State