## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS DOCUMENT # J34803 (3)MILTEC ENGINEERING, INC. Principal Place of Business Mailing Address 14110 HARBORWOOD DR. 14110 HARBORWOOD DR. LARGO FL 34644 **LARGO FL 34644** 3. Date Incorporated or Qualified 3a. Date of Last Report 09/24/1986 03/13/1995 2. Principal Place of Business 2a. Mailing Address 4 FEI Number Applied For NOT APPLICABLE 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zφ Country Ζıp Country This corporation has liability for intangible tax under s 199.032, 24 25 29 30 Yes No Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name LEE, KENNETH R. 82 Street Address (P.O. Box Number is Not Acceptable) 14110 HARBORWOOD DR. **LARGO FL 34644** 83 **84** City Zip Code 85 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) CR2E034 (12/95) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PD TITLE ☐ DELETE 1. 1 TITLE ☐ Addition Change LEE, KENNETH R. NAME 1.2 NAME 14110 HARBORWOOD DR. STREET ADDRESS 1.3 STREET ADDRESS LARGO FL CHY-ST-ZP 1.4 CITY - ST - Z(P ŚĪ TrillE DELETE ☐ Addition 2 1 TITLE Change LEE, LOIS A. NAME 2.2 NAME 14110 HARBORWOOD DR. STREET ADDRESS 2.3 STREET ADDRESS LARGO FL CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE DELETE 3 1 TITLE Change Add tion NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4 C(TY-ST-Z)P TIBLE □ DELETE 4.1 T/TLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST- ZIP TITLE DELFTE 5. 1 TITLE [ ] Change ☐ Addition 5.2 NAME STREET ADDRESS 53 STREET ADDRESS CITY-ST-ZIF 54 CHY-ST-ZIP TITLE DELETE 6 1 TITLE Change ■ Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6 4 CITY-ST-ZIP 14. Ido 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)(k). Florida Statutes. I further certify that the information indicated on this angular report or subplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the conforation or the viceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if planged, or the empower of the conforation or the viceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: