2000 UNIFORM BUSINESS REPORT (UBR)

FILED **DOCUMENT # J59053** Apr 03, 2000 8:00 am Secretary of State 1. Entity Name MIL-TEC USA, INC. 04-03-2000 90179 043 ***150.00 Principal Place of Business Mailing Address 2213 ANDREA LANE 2213 ANDREA LANE SUITE 105 SUITE 105 FORT MYERS FL 33912 FORT MYERS FL 33912-1934 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 59-2806372 Not Applicable Country Zip \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name FLUECKIGER, RUDY Street Address (P.O. Box Number is Not Acceptable) 2213 ANDERA LANE SUITE 105 FORT MYERS FL 33912 Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change ☐ Addition TITLE ☐ Delete TITLE FLUECKIGER, RUDY NAME NAME STREET ADDRESS STREET ADDRESS 6812 GRIFFIN BLVD. CITY-ST-ZIP CITY-ST-ZIP FT. MYERS FL D۷ Change ☐ Addition ☐ Delete TITLE FLUECKIGER, SUE J. NAME NAME STREET ADDRESS STREET ADDRESS 6812 GRIFFIN BLVD. CITY-ST-ZIP CITY-ST-7iP FT. MYERS FL ☐ Change ☐ Addition Defete TITLE TITLE SIMPSON, MICHAEL NAME NAME STREET ADDRESS STREET ADDRESS 1523-18TH AVE. N CITY-ST-ZIP CITY-ST-ZIP **TEXAS CITY TX 77590** Change Addition Delete TITLE TITLE MILO. CHESTER NAME STREET ADDRESS STREET ADDRESS 2237 WOODLAND BLVD. CITY-ST-ZIP CITY-ST-ZIP FT. MYERS FL 33907 ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED MAKE OF SIGNING OFFICER OR DIRECTO

Murch 28, 2000

941-437-030

Daytime Phone #

CHZECS4 S/SS