

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J62100

Entity Name: MILTEC MACHINING, INC.

FILED
Jan 26, 2004
Secretary of State

Current Principal Place of Business:

9351 HAMMAN AVE
PENSACOLA, FL 32514 US

New Principal Place of Business:

Current Mailing Address:

9351 HAMMAN AVE
PENSACOLA, FL 32514 US

New Mailing Address:

FEI Number: 59-2801639

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILSON, JOHN T.
2355 SUGARTREE AVE
PENSACOLA, FL 32503 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: WILSON, JUANITA,
Address: 200 PENSACOLA BCH RD #E3
City-St-Zip: GULF BREEZE, FL

Title: SDT () Delete
Name: WILSON, JOHN T.,
Address: 2355 SUGARTREE AVENUE
City-St-Zip: PENSACOLA, FL

Title: DV () Delete
Name: WILSON, ROBERT E
Address: 3311 SUGARTREE AVE
City-St-Zip: PENSACOLA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: WILSON, JUANITA G DP
Address: 200 PENSACOLA BCH RD #E3
City-St-Zip: GULF BREEZE, FL 32561 US

Title: SDT (X) Change () Addition
Name: WILSON, JOHN T SDT
Address: 2355 SUGARTREE AVENUE
City-St-Zip: PENSACOLA, FL 32503 US

Title: DV (X) Change () Addition
Name: WILSON, ROBERT E DV
Address: 3311 SUGARTREE AVE
City-St-Zip: PENSACOLA, FL 32503 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JUANITA G. WILSON

DP

01/26/2004

Electronic Signature of Signing Officer or Director

Date