


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 16, 2004 08:00 AM
Secretary of State

DOCUMENT # K34172	
1. Entity Name SYSTEMS ENGINEERING AND LOGISTICS SUPPORT, INC.	

Principal Place of Business % FREDERICK J. SYLVESTER 14365 E COLONIAL DR. STE B-5 ORLANDO, FL 32826 US	Mailing Address % FREDERICK J. SYLVESTER 14365 E COLONIAL DR. STE B-5 ORLANDO, FL 32826 US
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07132004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2910824	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent SYLVESTER, FREDERICK J 2285 CORBETT RD ORLANDO, FL 32826

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	(NOTE: Registered Agent signature required when resigning)	DATE _____
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FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SYLVESTER, FREDERICK J 2285 CORBETT RD ORLANDO, FL 32826
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HEMRICK, JAMES R 2003 LAKE PICKETT ROAD ORLANDO, FL 32826
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SYLVESTER, LOU F 2285 CORBETT ROAD ORLANDO, FL 32826
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HEMRICK, RUTH L 2003 LAKE PICKETT ROAD ORLANDO, FL 32826
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SMITH, KEVIN D 2649 DANIELLE DR. OVIEDO, FL 32765
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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07/16/04-80002-003 150.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: <i>J.R. Hemrick</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	Date: 7/13/04	Daytime Phone #: 407-382-8612
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