

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

FILED  
Mar 20 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # K53725 (3) 1. Corporation Name <b>GROUP TECHNOLOGIES CORPORATION</b>			
2. Principal Place of Business 10901 Malcolm McKinley Dr. Tampa, FL 33612 USA		2a. Mailing Address <del>675 FOWLER WHITE GILLEN BOGGS</del> <del>501 E. Kennedy Blvd., Ste. 1700</del> Tampa, FL 33602 USA	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Zip
24	Country	29	Country
25		30	
9. Name and Address of Current Registered Agent <b>FOWLER WHITE GILLEN BOGGS VILLAREAL BANKER</b> <del>ATTN: RON HIGBEE</del> 501 E. KENNEDY BLVD., SUITE 1700 TAMPA, FLORIDA 33602		10. Name and Address of New Registered Agent 81 Name <b>Same as shown</b> 82 Street Address (P.O. Box Number is Not Acceptable) <b>ATTN: David C. Shobe</b> 83 <b>Same as shown</b> 84 City <b>Same as shown</b> 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 agree to the obligations of, Section 607.0505, Florida Statutes. SIGNATURE <i>[Signature]</i> 3/13/97 Sign the typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	
14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.		600002119926 -03/20/97--01129--034 ***173.75	

SIGNATURE: *[Signature]* Michael Schuman, Esq., Secretary 3/12/97

CR2E034 (9/96)

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**GROUP TECHNOLOGIES CORPORATION  
1997 CORPORATION ANNUAL REPORT  
CONTINUATION SHEET**

12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.
Title Name Street Address City, State, Zip	V <input checked="" type="checkbox"/> Delete Davis, Richard L. 10901 Malcolm McKinley Drive Tampa, Florida 33612	7.1 Title 7.2 Name 7.3 Street Address 7.4 City, State, Zip	<input type="checkbox"/> Change <input type="checkbox"/> Addition
Title Name Street Address City, State, Zip	V <input checked="" type="checkbox"/> Delete Harris, J. Hardie 10901 Malcolm McKinley Drive Tampa, Florida 33612	8.1 Title 8.2 Name 8.3 Street Address 8.4 City, State, Zip	<input type="checkbox"/> Change <input type="checkbox"/> Addition
Title Name Street Address City, State, Zip	D Frigon, Henry F. 10901 Malcolm McKinley Drive Tampa, Florida 33612	9.1 Title 9.2 Name 9.3 Street Address 9.4 City, State, Zip	<input type="checkbox"/> Change <input type="checkbox"/> Addition
Title Name Street Address City, State, Zip	D Petersen, Sidney R. 10901 Malcolm McKinley Drive Tampa, Florida 33612	10.1 Title 10.2 Name 10.3 Street Address 10.4 City, State, Zip	<input type="checkbox"/> Change <input type="checkbox"/> Addition
Title Name Street Address City, State, Zip	V <input checked="" type="checkbox"/> Delete Allen, Anthony C. 10901 Malcolm McKinley Drive Tampa, Florida 33612	11.1 Title 11.2 Name 11.3 Street Address 11.4 City, State, Zip	<input type="checkbox"/> Change <input type="checkbox"/> Addition
Title Name Street Address City, State, Zip	D Roger W. Johnson 10901 Malcolm McKinley Drive Tampa, Florida 33612	12.1 Title 12.2 Name 12.3 Street Address 12.4 City, State, Zip	<input type="checkbox"/> Change <input type="checkbox"/> Addition