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Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **K78842** **(7)**

1. Corporation Name
THE MONO-TEC GROUP, INC.

Principal Place of Business	Mailing Address
2090 S. NOVA RD. #AA-13 SOUTH DAYTONA FL 32119 US	C/O MICHAEL W. TUCKER 932 TALL PINE DRIVE PORT ORANGE FL 32127-7701

3. Date Incorporated or Qualified: 04/10/1989
3a. Date of Last Report: 04/29/1996

2. Principal Place of Business	2a. Mailing Address
21	26 2090 S. Nova Rd.
Suite, Apt. #, etc.: 22	Suite, Apt. #, etc.: 27 AA-13
City & State: 23	City & State: 28 South Daytona - Fl.
Zip: 24 / Country: 25	Zip: 29 32119 / Country: 30 U.S.A

4. FEI Number: NOT APPLICABLE ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
TUCKER, MICHAEL W. 932 TALL PINE DRIVE PORT ORANGE FL 32127	81 Name: Tucker Michael W. 82 Street Address (P.O. Box Number is Not Acceptable): 57 Bryan Cave Rd 83 South Daytona Fl 84 City: FL 85 Zip Code: 32119

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: M. W. Tucker President M.W. Tucker March 20/97
Signature(s) for printed name of registered agent & all title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PC	☑ DELETE	1.1 TITLE	President / C.E.O	☐ Change ☐ Addition
NAME	TUCKER, MICHAEL W.		1.2 NAME	Tucker Michael W.	
STREET ADDRESS	932 TALL PINE DRIVE		1.3 STREET ADDRESS	57 BRYAN CAVE Rd -	
CITY-ST-ZIP	PORT ORANGE FL		1.4 CITY-ST-ZIP	South Daytona Fl - 32119 -	
TITLE	VD	☑ DELETE	2.1 TITLE	VD	☐ Change ☐ Addition
NAME	FITSELL, TOM		2.2 NAME	Fitsell Tom	
STREET ADDRESS	701 DON MILLS RD STE 901		2.3 STREET ADDRESS	" (as above)	
CITY-ST-ZIP	ONTARIO, CANADA		2.4 CITY-ST-ZIP		
TITLE	TS	☑ DELETE	3.1 TITLE	TS	☐ Change ☐ Addition
NAME	TUCKER, MICHAEL W		3.2 NAME	Tucker Michael W.	
STREET ADDRESS	932 TALL PINE DR		3.3 STREET ADDRESS	" (as above)	
CITY-ST-ZIP	PORT ORANGE FL		3.4 CITY-ST-ZIP		
TITLE	D.	☐ DELETE	4.1 TITLE	D.	☐ Change ☐ Addition
NAME	Lysa G. Tucker		4.2 NAME	Lysa G. Tucker	
STREET ADDRESS			4.3 STREET ADDRESS	" (as above)	
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (9/96)

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.

SIGNATURE: M. W. Tucker M.W. Tucker March 20/97 904 767-32[illegible]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0023315