

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L33518

FILED  
Apr 20, 2004  
Secretary of State

Entity Name: HAL-TEC ENGINEERING, INC.

**Current Principal Place of Business:**

405 N REO STREET  
SUITE 240  
TAMPA, FL 33609 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 20112  
TAMPA, FL 336220112 US

**New Mailing Address:**

FEI Number: 59-2986238

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KUSSNER, STEPHEN L.  
ONE TAMPA CITY CENTER, SUITE 2100  
TAMPA, FL 33602 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: HALES, ROBERT J.,  
Address: 405 N. REO ST.  
City-St-Zip: TAMPA, FL

Title: VP ( ) Delete  
Name: TAFELSKI, EDWIN D  
Address: 405 N REO STREET, STE 240  
City-St-Zip: TAMPA, FL 33609

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ROBERT J HALES

DP

04/20/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date