


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 02, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000150976 1. Entity Name STEALTH CONSTRUCTION, USA, INC.	
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Principal Place of Business 1919 NE 1ST STREET DEERFIELD BEACH, FL 33441-4504 BR	Mailing Address 1919 NE 1ST STREET DEERFIELD BEACH, FL 33441-4504 BR
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04282005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 58-2678022	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent BELLEFEUILLE, MICHAEL E 1919 NE 1ST STREET DEERFIELD BEACH, FL 33441-4504

**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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P VALERA, MARY 1919 NE 1ST STREET DEERFIELD BEACH, FL 334414504
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BELLEFEUILLE, MICHAEL E 1919 NE 1ST STREET DEERFIELD BEACH, FL 334414504
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05/04/05-80027-010 158.75

**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: M. E. Bellefeuille **MICHAEL E. BELLEFEUILLE** 4-29-05 (954) 818-0375
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #