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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

FILED

May 02 1997 8:00am

Secretary of State

205

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000022981 (3)

STEC AMERICA, INC.

Principal Place	e of Business	Mailing Address	Mailing Address		4 16055001 518 50100 51111 50551 00515 00515	88:14 11518 11675 1819	I ADIEL IEDE IVO
2121 SW 7TH AVENUE MIAMI FL 33129		2121 SW 7TH AVENUE MIAMI FL 33129-1907				•	
					3. Date Incorporated or Qualified 03/24/1993	3a. Date of La	
<u> </u>	lace of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number		Applied For
Suite, Apt. #, etc.		26			65-0412463		Not Applicable
22		Suite, Apt. #, etc.	27		5. Certificate of Status Desired	1 1	75 Additional e Required
City & State		City & State	- ¬ ′		Election Campaign Financing Trust Fund Contribution		00 May Be ded to Fees
Zip 24	Country Zip 25 29		Oountry 30	Country 8. This corporation has liability for intangible tax under s. Florida Statutes Yes No		er s. 199.032,	
	9, Name and Address of Current				10. Name and Address of New Re		
CRU	Z, STEPHEN L		81	Name			
2121	I SW 7TH AVENUE		82	82 Street Address (P.O. Box Number is Not Acceptable)			
MIAMI FL 33129			83				i
			84	City		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 accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE		and the content correctly	Tioned Oldiero				
	Signature typed or printed name of registered ager			ent signature requir	red when reinstating)	DATE	
12.	OFFICERS AND	DIRECTORS DELETE	18. 1,1 TITLE	 -	ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC	
NAME	CRUZ, STEPHEN L		1.9 NAME			Cria	ige L Addition
STREET ADDRESS 2121 SW 7TH AVENUE				I ADDRESS			
CITY-ST-ZIP	MIAMI FL 33129		1.4 CITY-ST-ZiP				
TITLE		DELETE	DELETE 21 TITLE			Cha	nge Addition
NAME			2 % NAME				
STREET ADDRESS			2.3 STREET ADDRESS				
CITY-ST-ZIP			2 4 CITY-	ST - 7/P			
TITLE		L_ DELETE	3 1 1ITLE			∐ Cha	nge L. Addition
NAME STREET ADORESS			3 \$ NAME	I ADDRESS			
CITY-ST-ZIP			3.4. CHY-				1
TITLE		☐ DELETE	4.1 11[LE	91 · £IF		Cha	nge Addition
NAME			4.12 NAME				• -
STREET ADDRESS			4.8 STREE	T ADDRESS			
CITY-ST-ZIP			4.# CITY-:	\$1 - 7 IP			i
TITLE	LE □ DEL		5 1 1111.0			Cha	nge 🔲 Addition
NAME			5 2 NAME				
STREET ADDRESS				LADDRESS			
CITY-ST-ZIP		DELETE	5.≰ CITY-:	ST - 7/P			
TITLE NAME		נ ו שנונונ	6111111			L.] Cha	nge 🔲 Addition
STREET ADDRESS			6.2 NAME	I ADDRESS	*		ĺ
Januar Advances			Dasinit	F PODDE 09			

14. I do hereby certify that the information supplied with this filling 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