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PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P94000089864 (0)**

1. Corporation Name CHANGED
~~THE BLIND SPOT SPACE COAST, INC.~~
SEVEN DAY SHUTTERS SPACECOAST INC.

NC 2-12-96

Principal Place of Business	Mailing Address
~~447 BRIDGETOWN CT.~~ ~~SATELLITE BEACH FL 32937~~ 4270 DOW RD. SUITE 201 MELBOURNE, FL 32934	~~447 BRIDGETOWN CT.~~ ~~SATELLITE BEACH FL 32937~~ ← SAME

2. Principal Place of Business	2a. Mailing Address
21 4270 DOW RD	26 4270 DOW RD
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 SUITE 201	27 SUITE 201
City & State	City & State
23 MELBOURNE FL	28 MELBOURNE FL
Zip / Country	Zip / Country
24 32934 25 USA	29 32934 30 USA

3. Date Incorporated or Qualified: 12/12/1994
3a. Date of Last Report: 03/28/1995
4. FEI Number: ~~APPLIED FOR~~ 59-3300507 ☐ 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

BAUER, RICHARD C
447 BRIDGETOWN CT.
SATELLITE BEACH FL 32937

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
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: Richard C Bauer V.P. 4-15-96
Signature, typed or printed name of registered agent and 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 / NAME / STREET ADDRESS / CITY-ST-ZIP	D BAUER, RICHARD C 447 BRIDGETOWN CT. SATELLITE BEACH FL 32937	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	VICE PRESIDENT BAUER, RICHARD C 447 BRIDGETOWN CT SATELLITE BEACH, FL 32937	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BAUER, DONNA J 447 BRIDGETOWN CT. SATELLITE BEACH FL 32937	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	PRESIDENT BAUER DONNA J 447 BRIDGETOWN CT SATELLITE, BEACH FL 32937	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	300001790203 -04/23/96--01059--003 ***200.00	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	DEB 4-22-96	☐ Change ☐ Addition

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Richard C Bauer V.P. 4-15-96 (407) 255-1999
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #