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

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000075295 (2)

STEALTH ENTERPRISES, INC.

Principal Place of Business Mailing Address 3601 LANDINGS WAY DRIVE, UNIT 208 3601 LANDINGS WAY DRIVE, UNIT 208 TAMPA FL 33624 TAMPA FL 33624-3038 3. Date Incorporated or Qualified 3a. Date of Last Report 09/29/1995 04/25/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 4506 GOSSAMER OT 4506 GOSSAMER CT 59-3347008 26 Sulte, Apt. #, etc. Suite, Apt. #, etc. M 5. Certificate of Status Desired City & State City & State TAMPA TAMPA, 28 Country

THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD 343 ALMERIA AVENUE **CORAL GABLES FL 33134**

9. Name and Address of Current Registered Agent

		- Serimbate of States Deant	, A	Fee Required				
		6. Election Campaign Finance Trust Fund Contribution	ing	\$5.00 May Be Added to Fees				
Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statules						
		10. Name and Address of N	ew Registered	Agent				
81	Name							
82	Street Address (P.O. Box Number is Not Acceptable)							
83								
84	City			85 Zip Code				

FILED

Apr 30 1997 8:00am

Secretary of State

Applied For

\$8.75 Additional

Not Applicable

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 Signature, typed or printed name of registered agent and title 4 approache (NOTE: Registered Agent signature required when reinstating).											
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12								
TITLE	PD	DELETE	1.1 TITLE	CEO	X Change	Addition					
NAME	LEONARDO, GREGORY J		1.2 NAME		•						
STREET ADDRESS	3601 LANDINGS WAY DRIVE, UNIT 208		1.3 STREET ADDRESS			•					
CITY-ST-ZIP	TAMPA FL 33624		1.4 C(TY - S1 - Z(P								
TITLE	V	DELETE	2.1 1111.6	COO	Change	Addition					
NAME	SMITH, JEFFREY		2.2 NAME								
STREET ADDRESS	3601 LANDINGS WAY DRIVE, UNIT 208		2.3 STREE1 ADDRESS								
CITY-ST-ZIP	TAMPA FL		2.4 C(1Y - S1 - Z(P	<u></u>							
TITLE	TD	DELETE	3.1 TITLE	CFO	🔀 Change	Addition					
NAME	LEONARDO, KATHERINE		3.2 NAME								
STREET ADDRESS	3801 LANDINGS WAY DRIVE, UNIT 208		3.3 STREET ADDRESS								
CITY-ST-ZIP	TAMPA FL 33624		3.4. CITY - S1 - ZIP								
TITLE	S	DELETE	4.1 TITLE	~	Change	Addition					
NAME	SMITH, JENNIFER	•	4. 2 NAME								
STREET ADDRESS	3801 LANDINGS WAY DR., #208		4.3 STREET ADDRESS								
CITY-ST-ZIP	TAMPA FL		4.4 CiTY - ST - ZIP								
TITLE		☐ DELETE	5.1 TITLE .		☐ Change	Addition					
NAME			5.2 NAME			Ì					
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								

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.

6.4 CITY - ST - ZIP

11-14 07 510 070 01711