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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATI

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P96000076690** (2)

SPACE COAST TECHNICAL SERVICES, INC.

FILED
May 07 1997 8:00am
Secretary of State



2870 ROCKY POINT ROAD MALABAR FL 32950		2070 ROCKY POINT ROAD Malabar FL 32950-4609					
					3. Date Incorporated or Qualified 09/13/1996	3a. Date of Last	: Report
·	Place of Business	2a. Mailing Address		4. FEI Number		Applied For	
21		26			59-3403956	[7]	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #. etc.		5. Certificate of Status Desired	1 1 7	\$8.75 Additional Fee Required	
City & Sta	ite	City & State			Election Campaign Financing Trust Fund Contribution		May Be
Zip 24	Country 25	Ziр 29	30 Cou	ntry	8. This corporation has liability for it		
	9. Name and Address of Curren		1001		10. Name and Address of New Reg		
HEC	K, OKSANA			81 Name		,	
	D ROCKY POINT ROAD			82 Street Add	trans (D.O. Double subset is black to a sub-		
	ABAR FL 32950			5licel Add	dress (P.O. Box Number is Not Acceptab	ie)	
				83			
: :				84 City		85 7i	p Code
<u> </u>							
office of	t to the provisions of Sections 607 050. registered agent, or both, in the State am familiar with, and accept the obliga	of Florida, Such change was	authorized	t by the corpora	poration submits this statement for the patien's board of directors. I hereby accept	urpose of changing I the appointment a	its registered as registered
SIGNATURE							
12.	Signature typed or printed non-e-of registered age OFFICERS ANE	•	It Registered	Agent signature requ	Hed when resistating) ADDITIONS/CHANGES TO OFFIC	DAIL	202 181 40
TITLE	ID OF TOUR	DELETE	11111	(F	ADDITIONS/CHANGES TO OFFIC	Change	
NAME	HECK, OKSANA		1 2 NA			Onling	. [_] Addition
STREET ADDRESS	2870 ROCKY POINT ROAD			REET ADDRESS			
CITY-ST-ZIP	MALABAR FL 32950	AD EL GOORA		Y- \$1 - ZIP			
TITLE			2.1 111			Change	E Addition
NAME			2.2 NA	Mf		— ·	
STREET ADDRESS			2.3 ST	REET ADDRESS			
CITY-ST-ZIP	MALABAR FL 32950		2 4 G	IY-S1-ZIP			
TITLE	DITETE		3 1 717	LE .		☐ Change	Addition
NAME			3.2 NA	ME			
STREET ADDRESS			3381	RELT ADDRESS			
CITY-ST-ZIP			3.4 CI	IY-S1-7IP			
TITLE	☐ DELETE		4.1 TIT	LF		Change	Addition
NAME			4 2 N/	ME			
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CITY-ST-ZIP		T styry		Y-S1-7IP			
TITLE			5 1 313			L_f Change	Addition
NAME	İ		5 2 NA				
STREET ADDRESS				REEL ADDRESS			
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			61717	i		Change	Addition
NAME STREET ADDRESS			6 2 NA				
				REET ADDRESS			
CITY-ST-ZIP			6.4 CIT	Y - ST - ZIP			

4. I 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 eath; 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 a haddress.
