## 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 # P9600079301 (3)

STEALTH TECHNOLOGIES GROUP, INC.

**FILED** May 07 1997 8:00am Secretary of State

Principal Plac 870 NORTHWE PEMBROKE PII	ST 108 TERRACE		Mailing Address 370 NORTHWEST 106 TERRACE PEMBROKE PINES FL 33026-5932						
 						3. Date Incorporated or Qualified 09/24/1996	3a. [	Date of Last R	leport
· ·	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number			oplied For
Suite, Apt.	H ata	26	→ <sup>1</sup>			<u> </u>			ot Applicable
22 Suite, Apri.	#, BIC.	Suite, Apt. #, etc.	27			5. Certificate of Status Desired			Additional equired
City & Stat	ê		City & State			6. Election Campaign Financing			- 1
23		28	† "¬			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Cou	Country		8. This corporation has liability for			
24	25	29]	30			Florida Statutes Yes No			
N	9. Name and Address of Curre	nt Registered Agent		0.1		10. Name and Address of New Re	gistered	Agent	
AMERILAWYER CHARTERED				В1	Name				
	ALMERIA AVENUE VAL GABLES FL 33134		<b>82</b> Street Ad		Street Addr	ess (P.O. Box Number is Not Acceptat	ile)		
UUF	VAL SMOLEO FL 33134			83					
Programme and the second								<del></del>	
		•		84	City		Fl	85 Zip (	Code
office or r agent. I a	to the provisions of Sections 607.05 registered agent, or both, in the Station familiar with, and accept the objections.	e of Horida. Such change wa	s authorized	d by	the corporat	oration submits this statement for the pion's board of directors. I hereby acception's	urpose of the ap	of changing it pointment as	s registered registered
SIGNATURE	Signature, typod or punted have of registered as	gentasa Die Jappicasa (N	iOH Registine	1 Agei	nt signature region	eo when reinstating)	DAIL		
12.	OFFICERS AN	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC		D DIRECTOR	IS IN 12
THLE	PD DATE OF THE PARTY OF THE PAR	☐ DECETE	1,1 10	Ιŧ		- D-4	•	Change	Addition
NAME	PUTRINO, ROBERT P	٥٢	1.2 N#	MÉ		OBERT T. ROTRI	N O		
STREET ADDRESS	370 NORTHWEST 106 TERRA PEMBROKE PINES FL 33026				RESS				
CITY-ST-ZIP	STD	DEVETE	1.4 (1		1 - 2(1)			Change	T Addits
NAME	PUTRINO, MARY ANN		2.1 III 2.2 N/					L Change	L Addition
STREET ADDRESS	370 NORTHWEST 106 TERRA	CE			ADDRESS				
CITY-ST-ZIP	PEMBROKE PINES FL 33026	<u>-</u>	2 4 0						
TITLE		DELETE	3110					Change	Addition
NAME			3 2 NA	ME				-	
STREET ADDRESS			3381	REET	ADURESS				ļ
CITY-ST-ZIP	·· · · - · · · · · · · · · · · ·		3 4 C	IIY-S	T - ZIP				
TITLE		DEFETE	4.1 111					Change	Addition
NAME			4 2 N						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP TITLE		DELETE	4.4 CI 5 1 10		1-7IP			☐ Change	Addition
NAME		בן סנונוב	5.2 NA					шл онапус	CT MODIBUTE
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			5 4 Ci		4				
TITLE		DELETE	6 1 TD					Change	Addition
NAME			6 2 NA		1			-	
STREET ADDRESS			6381	HFE?.	ADDRESS				
CITY-ST-ZIP			6.4 CI	1¥-S1	1-7IP				

14. 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 supplement 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 contraction or the recognition or the recognition or the recognition or the recognition.