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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000014611

1. Corporation Name

MILITARY SPARE PARTS, INC.

FILED Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90177 024 ***150.00



								ener in de la
Principal Place of Business Mailing Address							, , , , , , , , , , , , , , , , , , , ,	2.1.2.1.1.2. 1
7707 STIRLING BRIDGE BLVD. NORTH 7707 STIRLING BRIDGE BLVD.								
DELRAY BEACH	FL 33446	DELRAY BEA	DELRAY BEACH FL 33446			DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed	-	
						02/13/1998		
2. Principal Pla	ace of Business	2a. Mailing	Address			4. FEI Number	a 🗔	Applied For
21		26				4. FEI Number 5-08/226	/	Not Applicable
Suite, Apt. #	⊭, etc.		pt. #, etc.			5. Certifcate of Status Desired	\$8.7	5 Additional
22 27						Certificate of Status Desired	Fee	Required
City & State City & State			itate			6. Election Campaign Financing		00 May Be
23		28				Trust Fund Contribution		ed to Fees
Zip	Country	Zip	<u></u>	Country		8. This corporation owes the current ye		m
24	25	29	30	L.,		Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Currer	nt Registered Ag	ent	81	Name	10. Name and Address of New Regis	ereu Agent	
TILLEM, SCOTT E					NAME SALTUS, KAKEN			
10 FAIRWAY DRIVE				82	Street Add	ress (P.O. Box Number is Not Acceptable)	no Rh	dN.
SUITE 219				83		LINT STUTING DEP	ye Un	KA IV '
DEERFIELD BEACH FL 33441				63	1	Delray Beach. Ho		
J. C.	# 1222 DETON 1 C 00771			84	City	,	FL 85	Zip Code
· · · · · · · · · · · · · · · · · · ·		007 4500		the show		noration cultimits this statement for the nurrous		DO446
l office or re	edistered agent or both in the State	of Florida, Such	change was autho	orized by	the corporat	poration submits this statement for the purpo- tion's board of directors. I hereby accept the	appointment a	s registered
agent, I ar	n familiar with, and accept the offliga	tions of Section	607.0505, Florida	Statutes	~1 -	15	199	
SIGNATURE	then to	rus	KHET	Victored Agen		red when reinstating)	TE 3 /	
12.	Signature typed or printed name of registered age OFFICERS At	ND DIRECTORS	(NOTE: Reg	13.	r agriature requi	ADDITIONS/CHANGES TO OFFICE	RS AND DIRE	CTORS IN 12
TITLE	PD		OELETE	1.1 TITLE			☐ Char	
NAME	SALTUS, KAREN			1.2 NAME				}
STREET ADDRESS	7707 STIRLING BRIDGE BLVD.	NORTH		1.3 STREET	ADDRESS			
CITY-ST-ZIP	DELRAY BEACH FL 33446			1.4 CITY-S	r-ZIP	_		
TITLE	TSD		☐ DELETE	2.1 TITLE			☐ Char	nge 🔲 Addition
NAME	SALTUS, RONALD			2.2 NAME				,
STREET ADDRESS	7707 STIRLING BRIDGE BLVD	NORTH		2 3 STREET	ADDRESS	نت الله والداد المتكرينينيونيونيونيونيوني	ا برم <u>ساری</u> حبت ا	
CITY-ST-ZIP	DELRAY BEACH FL 33446			2. 4 CITY-S	T-ZIP			
TITLE			☐ DELETE	3.1 TITLE			Char	nge 🔲 Addition
NAME				3.2 NAME				
STREET ADDRESS				3.3 STREET	FADORESS			
CITY-ST-ZIP				3.4. CITY-S	iT-ZIP			
TITLE			☐ DELETE	4.1 TITLE			Chai	nge
NAME				4. 2 NAME				
STREET ADDRESS				4.3 STREET	ADDRESS			
CITY-ST-ZIP				4.4 CITY-S	T-ZIP			
TITLE			DELETE	5.1 TITLE			Char	nge 🗌 Addition
NAME				5.2 NAME				
STREET ADDRESS				5.3 STREET	T ADDRESS			
CITY-ST-ZIP				5.4 CITY-S	T-21P			
TITLE			☐ DELETE	6.1 TITLE			☐ Chai	nge
NAME				6.2 NAME				,
STREET ADDRESS				6.3 STREET	ADDRESS			·
CITY-ST-ZIP				6.4 CITY-S	T-ZIP			

CITY-ST-ZIP 14. I 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, with all other like empowered.