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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## 1999 DOCUMENT # V63642 1. Corporation Name

U.S. TACTICAL CORP.

Princ	ipal	Place of	Business

Mailing Address

## **FILED** Feb 12, 1999 8:00am **Secretary of State**

02-12-1999 90025 015 \*\*\*150.00



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8364 SW 40TH ST 8364 SW 40TH ST MIAMI FL 33165 MIAMI FL 33165						DO NO	T WRIT	E IN THIS	SPACE		
						3. Date Incorporated or Qu 09/14/1992				: '	
Principal Place of Business     2a. Mailing Address						4. FEI Number			A	pplied For	
21		26				65-0359898			<del></del>	ot Applicable	
Suite, Apt. #, etc. Suite, Apt. #, e 22			#, etc.			5. Certificate of Status Des	ired		\$8.75 Fee R	Additional ·	
City & State	City & State	ty & State			6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees						
Zip				гу		8. This corporation owes the current year Intangible Personal Property Tax.					
	9. Name and Address of Currer	t Registered Agent				10. Name and Address of	New R	gistered /	Agent		
			8	1	Name						
VILLANUEVA, RODOLFO 9500 SW 45TH ST			8	2	Street Addre	dress (P.O. Box Number is Not Acceptable)					
MIAI	MI FL 33165		8	3		1111111111111111111111111111111111111		213:31	5 8 2 4 51	480 818 (GA)	
			8	4	City	han distribution	1,544	<u>Maril</u> Fl		Code	
	to the provisions of Sections 607.050	O 1 CO7 4500 Florido Statuto	s the abo		named corne	protion cubmits this statement	for the r	urnosa of	hanging it	s registered	
agent. I a	to the provisions of Sections	itions of, Section 607.0505, Flori	da Statute	es.		when reinstating)		DATE			
12.	OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHANGES	TO OFF	ICERS AN			
TITLE	D	☐ DELETE	1.1 TITLE			and the state of			☐ Change	☐ Addition	
NAME	VILLANUEVA, RODOLFO		1.2 NAM	Ε					•		
STREET ADDRESS	9500 SW 45TH ST		1.3 STRE	ETA	ADDRESS				- 1		
CITY-ST-ZIP	MIAMI FL		1.4 CITY-		ZIP						
TITLE		☐ DELETE	2.1 TITLE			•			☐ Change	☐ Addition	
NAME			2.2 NAM	E		•			, ,		
STREET ADDRESS			2.3 STRE	ET A	ADDRESS	:					
CITY-ST-ZIP			2. 4 CITY		-ZIP				Change	☐ Addition	
TITLE		☐ DELETE	3,1 TITLE						□ Citalige	L. Addison	
NAME :	Programme and the second		3.2 NAMI								
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NAME					ADDRESS						
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CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITLE		·ZIF	<del></del>		•	☐ Change	☐ Addition	
			5.2 NAME								
NAME STREET ADDRESS			5.3 STRE	ETA	ADDRESS					ĺ	
CITY-ST-ZIP	f h Le		5.4 CITY	-ST-	ZIP	Exp. Com			2		
TITLE	3 3	. DELETE	6.1 TITLE						☐ Change	☐ Addition	
NAME	214		6.2 NAM	E		•				}	
STREET ADDRESS			6.3 STRE	ETA	ADDRESS				÷		
CITY-ST-ZIP			6.4 CITY	-ST-	ZIP						
O(11-01-2IP	L					ection 119 07(3)(i) Florida Sta					

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 cath; 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.

SIGNATURE: