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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 455592

(6)

FILED

Apr 14 1997 8:00am

Secretary of State

| 1. Corporation Name S & R FASTENER CO. Principal Place of Business Mailing Address 6330 118TH AVE N. PO BOX 60 LARGO FL 33779-0060 US | | | | | |
|--|---|--|--|--|--|
| | | | | 3. Date Incorporated or Qualified 06/28/1974 | 3a. Date of Last Report 04/22/1996 |
| 2. Principal F | Place of Business | 2a. Mailing Address | | 4. FEI Number | Applied For |
| 1 | | 26 | | 59-1531372 | Not Applicab |
| Suite, Apt. | #, etc | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional |
| 2 | | 27 | | G. Certificate of olding Desired | Fee Required |
| City & Sta | le | City & State | | 6. Election Campaign Financing | \$5.00 May Be |
| 3] Zip | Country | 28 Zip | Country | Trust Fund Contribution | Added to Fees |
| 4 | 25 | 29 | 30 | This corporation has liability for it Florida Statutes | Yes No |
| *1 | 9. Name and Address of Current | | 1901 | 10. Name and Address of New Re | |
| BUS | SCH, STEVEN R | | 81 Name | | · · · · · · · · · · · · · · · · · · · |
| | 4 HARBOR HILLS DR | | B2 Street Add | Iress (P.O. Box Number is Not Acceptab | nie) |
| LAR | GO FL 34640 | | 0,00,11,00 | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| | | | 83 | | |
| | | | B4 City | | 85 Zip Code |
| | | | 1 1 | | FL! |
| Pursuant office or | t to the provisions of Sections 607,0502 | and 607.1508, Florida Statut | es, the above-named corpora | poration submits this statement for the p | ourpose of changing its registered |
| | to the provisions of Sections 607,0502 registered agent, or both, in the State of an familiar with, and accept the obligat Signature, typed or pertent name of registered agent | | es, the above-named cor authorized by the corpora orida Statutes. E: Registored Agent signature requ | | DATE |
| 11. Pursuant office or agent 1 a | | rand title if applicable. (NOT DIRECTORS | | | DATE DERS AND DIRECTORS IN 12 |
| SIGNATURE. 12, 1016 | Signature, typed or product name of registored agen OFFICERS AND | rand tille it applicable. (NOT | E: Registered Agent signature required 13. | ired when reinstating) | DATE |
| SIGNATURE. 1014 NAME | Stipulative, typed or product name of registated agen OFFICERS AND V BUSCH, JANET | rand title if applicable. (NOT DIRECTORS | E: Registered Agent signature required 13. 1.1 TITLE 1.2 NAME | ired when reinstating) | DATE DERS AND DIRECTORS IN 12 |
| SIGNATURE. 12. 1615 NAME STREET ADDRESS | Signature, typed or product name of registated agen OFFICERS AND V BUSCH, JANET 2079 N DRUID PARK DR | rand title if applicable. (NOT DIRECTORS | E: Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS | ired when reinstating) | DATE DERS AND DIRECTORS IN 12 |
| SIGNATURE. 10.4 10.4 NAME SIREFT ADDRESS COLY: ST-701: | Signature, typed or pectad name of registrated agon OFFICERS AND V BUSCH, JANET 2079 N DRUID PARK DR CLEARWATER FL | t and title if applicable. (NOT) DIRECTORS DELETE | E: Registered Agent signature required at 13. 1.1 TiTLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-SI-ZIP | ired when reinstating) | DATE CERS AND DIRECTORS IN 12 Change Addition |
| SIGNATURE. 12. HILE NAME STREET ADDRESS COLY-ST-ZIE | Signature, typed or pechadicarne of registrated agon OFFICERS AND V BUSCH, JANET 2079 N DRUID PARK DR CLEARWATER FL V | rand title if applicable. (NOT DIRECTORS | E: Registered Agent signature required agent signature required at 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE | ired when reinstating) | DATE DERS AND DIRECTORS IN 12 |
| SIGNATURE. 12. 101.F NAME STREET ASORESS COLY: \$1-20: TELE NAME | Signature, typed or pechadicative of registrated agon OFFICERS AND V BUSCH, JANET 2079 N DRUID PARK DR CLEARWATER FL V BUSCH, GERALD | t and title if applicable. (NOT) DIRECTORS DELETE | E: Registered Agent signature required to the signature required to th | ired when reinstating) | DATE CERS AND DIRECTORS IN 12 Change Addition |
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