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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

(5)

COMYNS INTERNATIONAL, INC.

**FILED** Apr 15 1998 8:00am Secretary of State

B. Landard Bland	7.0	B.BM. A. Alabara				IDAL OLDA DIDA DI	AIT OIDH IOBH
Principal Place of Business Mailing Address							
2723 LAKE FE ATLANTA GA		2723 LAKE FERRY LANE ATLANTA GA 30339					
US		U\$			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
					08/24/1982		
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	<b>⊢</b>	Applied For
21	<del></del>	26			59-2247379		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	·	Additional Regulred
22 Oit 8 Curto		City & State					
City & State	9				6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
23 Zip	Country	<b>28</b>	Count	rv			
24	25	29	30	.,	This corporation owes or has paid the Personal Property Tax due June 30.	TYes 1	No Do No
24	9. Name and Address of Curre	<u> </u>	1301		10. Name and Address of New Registere		DA NO DANE
KAI	THE, GUY M.		8	1 Name			
	NO GARDENA ST		8	5 0: 15:1	(200 Day March 2 1 No. 4		
UNIT 6				2 Street Add	dress (P.O. Box Number is Not Acceptable)		
	RAL GABLES FL 33134		8	3			
00	HAE GADLES PE SS 154						
			8	4 City		<b>E</b> 85 Zip	Code
11 Pursuant t	to the provisions of Sections 607.05	02 and 607 1508. Florida Statu	ites the abo	ve-named co	rporation submits this statement for the purpose	-	ils registered
office or re	egistered agent, or both, in the State	e of Florida. Such change was	authorized I	by the corpora	ation's board of directors. I hereby accept the a	ippointment a	s registered
•	m familiar with, and accept the oblig	jations of, Section 607.0505, F	iorida Statut	es.			
SIGNATURE	Signature, typical or printed name of registered as	ront and title diameterable (NO	If : Benistered A	gent signature reg	juired when reinstating) DATE		
12.		ND DIRECTORS	13.	gont organization req	ADDITIONS/CHANGES TO OFFICERS A		RS IN 12
TITLE	PD	☐ DFLETE	1.1 TITLE			☐ Change	
NAME	COMYNS, KENNETH C.		1.2 NAM	.			
STREET ADDRESS	2723 LAKE FERRY LANE		1.3 STRE	E1 ADDRESS			
CITY-ST-ZIP	ATLANTA GA		1.4 CITY				
TITLE			2.1 TITLE			☐ Change	Addition
NAME	COMYNS, DOROTHY M.		2.2 NAM	E			
STREET ADDRESS	2723 LAKE FERRY LANE		2.3 STRE	ET ADDRESS			
CITY-ST-ZIP	ATLANTA GA		2. 4 CITY				
TITLE	THE WITTER WATER	DELETE	3.1 7(1)			☐ Change	Addition
NAME			3.2 NAM				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP			3.4 CITY				
TITLE		☐ DELETE	4.1 70116			Change	Addition
NAME			4. 2 NAM	le l			
STREET ADDRESS			4.3 STRE	ET ADDRESS			
CITY-ST-ZIP			4.4 CITY	j			
TITLE		DELET <b>e</b>	5.1 TITLE			☐ Change	Addition
NAME			5.2 NAMI				
STREET ADDRESS			5.3 STRE	ET ADDRESS			
CiTY-ST-ZIP			5.4 CITY				
TITLE		DELETE	6.1 TITLE			☐ Change	Addition
NAME			6.2 NAM	Ε			
STREET ADDRESS				ET ADDRESS			
CITY-\$T-ZIP			6.4 CITY	<b>i</b>			
14. I hereby o	ertify that the information supplied s	with this filing does not qualify	for the exem	ption stated i	in Section 119.07(3)(i), Florida Statutes. I further	certify that th	e information
officer or o	on this annual report or supplement director of the corporation or the rec or Block 13 if changet for on an atta	ceiver or trustee empowered to	curate and to execute this	nat my signat s report as re	ture shall have the same legal effect as if made equired by Chapter 607, Florida Statutes; and th	under oath; ti at my name ai	nat I am an ppears in