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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Morthani Secretary of State

DIVISION OF CORPORATIONS

1996

H71619

1. Corporation	VENT Name	# [7] [1]	619	(1)						
SPEC	ialty m	ACHINERY & TO	OOLS, IN	C.						
Principal Place of Business Mailing Address								IBRA IBRI DIBIL DIBIL DIBIL D	BORN OLDUN OLDUN MAQU	
% KAREL OTCENASEK 700 JOHN RODES BLVD STE. A7 & A8 MELBOURNE FL 32904				% KAREL OTCENASEK 700 JOHN RODES BLVD MELBOURNE FL 32904		A7 & A8				
US				US			3. Date Incorporated or Qualified 08/16/1985	3a. Date of Last F 05/01/1		
2. Principal Place of Business Suite, Apt. #, etc. City & State 3			<u>├</u>	2a. Mailing Address 26			4. FEI Number 59-2599835		Applied For	
				Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional Fee Required		5 Additional	
			h1				Election Campaign Financing Trust Fund Contribution Added to Fees			
Zip !4	Zip Country 25		29	Zip Count 30		itry	This corporation has liability for intangible tax under s 199.032, Florida Statutes			
	9. Name	and Address of Cu	rrent Registe	ered Agent			10. Name and Address of New R	Registered Agent		
						B1 Name				
OTCENASEK, KAREL 700 JOHN RODES BLVD. A7,8 MELBOURNE FL 32904						82 Street Add	2 Street Address (P.O. Box Number is Not Acceptable)			
						83	85 Zip Code			
						84 City				
11 Pursuant to	o the provisi	ans of Sections 607.0	0502 and 607	1508 Elorida Statul	too the abou		pration submits this statement for the pur	FL		
or registere	ed agent, or	both, in the State of F pt the obligations of, S	Honda Such	change was authoriz	zed by the co	e-named corpo prporation's bea	ard of directors. Thereby accept the appi	rpose of changing its ointment as registered	registered office d agent. Lanı	
SIGNATURE .										
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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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/29/96 407-952.9096