

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 # ~~5349~~ 534989

1. Corporation Name

Florida Blower Inc

Principal Place of Business

Mailing Address

Box 47518
St Pete Fl 33743

2. Principal Place of Business

21

Suite, Apt. #, etc

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc

27

City & State

28

Zip

Country

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30

9. Name and Address of Current Registered Agent

Kenneth P. Prensly
1612 Huntington PL
Safety Harbor FL 34695

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when not a director)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

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139 TITLE

140 NAME

141 STREET ADDRESS

142 CITY-STATE-ZIP

143 TITLE

144 NAME

145 STREET ADDRESS

146 CITY-STATE-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

[1 Change] [1 Addition]

200002842492- - 5.
-04/16/99-01083-004
***150.00 ***150.00

\$84/16

[1 Change] [1 Addition]

[1 Change] [1 Addition]

[1 Change] [1 Addition]

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/99 7258687

CR2EC34 (1/1/98)