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

	98	DIVISION OF C	CORPORATIONS	Secretary	of State
DOCUMENT # J83494 (1) 1. Corporation Name APPONTS I PACK LIGHT SERVICE AND					
ABBOTTS	BACK-HOE SERVICE, IN	C.			
Principal Place of	Business	Mailing Address			HE BINI DIN BIN FIRM DIN H
% TED ABBOTT		% TED ABBOTT			
5701 SARAH AVE. SARASOTA FL 34		5701 SARAH AVE.		DO NOT WRITE IN THIS	S SPACE
SANASOTA FE 34	200	SARASOTA FL 34233		3. Date Incorporated or Qualified	3 31 AGE
				07/21/1987	
2. Principal Place	of Business	2a. Mailing Address	N. 1- 1-	4. FEI Number	Applied For
21 % Craic Suite, Apt. #, et		26 Suite, Apt. #, etc.	Trodatt	59-2827265	Not Applicable
257015	nonh Ave.	275701 Sar	ah Aug	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	d	City & State	30111100	6. Election Campaign Financing	\$5.00 May Be
23 00 1050	<u> </u>	28 Darasota	T _C	Trust Fund Contribution	Added to Fees
24 34233	Country S 25 USA	Zip コマルシネス	Country 30 USA	8. This corporation owes or has paid the co	
	Name and Address of Current I	29 3 (233 Begistered Agent	30 UOT	Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes No
ABBOTT, CRAIG					
EZO1 CADALI ANE				roco (B.O. Bay Nivelhar la Net Agrantable)	
SARASOTA FL 34233			oz Sireet Add	ress (P.O. Box Number is Not Acceptable)	
			83		
			84 City		85 Zip Code
Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corpo office or registered agent, or both, in the State of Florida. Such change was authorized by the corporatio agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.				FI	_ ` `
office or regist	e provisions of Sections 607,0502 a tered agent, or both, in the State of	Florida, Such change was a	es, the above-named corpora uthorized by the corpora	poration submits this statement for the purpose tion's board of directors. I hereby accept the ap	of changing its registered ppointment as registered
	miliar with, and accept the obligation	ons of, Section 607,0505, Flo	rida Statutes.		
SIGNATURE Signa	ture, typed or printed name of registered agent e	and title if applicable. (NOTE	: Registered Agent signature requi	red when reinstating) DATE	
12.	OFFICERS AND I				
TITLE	J		13.	ADDITIONS/CHANGES TO OFFICERS AN	
NAME [A	DDOTT TED	DIRECTORS DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
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CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I turther certify that the information 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.

FILED

Feb 06 1998 8:00am