

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Methman
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **M82423** (8)

1. Corporation Name
KNO-MAR TOOL & MOLD, INC.



Principal Place of Business
**14525 62ND ST. N.
CLEARWATER FL 34620**

Mailing Address
**14525 62ND ST. N.
CLEARWATER FL 34620**

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

g. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified 05/25/1988	3a. Date of Last Report 03/28/1995
4. FEI Number 59-2899010	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

**MARVEL, DAVID R.
14525 62ND STREET NORTH #9
10
CLEARWATER FL 34620**

81 Name	82 Street Address (P.O. Box Number is Not Acceptable)	83	84 City	85 Zip Code
			FL	

11. Pursuant to the provisions of Sections 607.01(4) and 607.15(2), 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: _____ DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.1 NAME PTD MARVEL, DAVID R. 14525 62ND STREET N. CLEARWATER FL	<input type="checkbox"/> DELETE	13.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.2 NAME SD MARVEL, MARY C. 14525 62ND ST. N. CLEARWATER FL	<input type="checkbox"/> DELETE	13.2 NAME	
12.3 NAME	<input type="checkbox"/> DELETE	13.3 STREET ADDRESS	
12.4 NAME	<input type="checkbox"/> DELETE	13.4 CITY-ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.5 NAME	<input type="checkbox"/> DELETE	13.5 TITLE	
12.6 NAME	<input type="checkbox"/> DELETE	13.6 NAME	
12.7 NAME	<input type="checkbox"/> DELETE	13.7 STREET ADDRESS	
12.8 NAME	<input type="checkbox"/> DELETE	13.8 CITY-ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.9 NAME	<input type="checkbox"/> DELETE	13.9 TITLE	
12.10 NAME	<input type="checkbox"/> DELETE	13.10 NAME	
12.11 NAME	<input type="checkbox"/> DELETE	13.11 STREET ADDRESS	
12.12 NAME	<input type="checkbox"/> DELETE	13.12 CITY-ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.13 NAME	<input type="checkbox"/> DELETE	13.13 TITLE	
12.14 NAME	<input type="checkbox"/> DELETE	13.14 NAME	
12.15 NAME	<input type="checkbox"/> DELETE	13.15 STREET ADDRESS	
12.16 NAME	<input type="checkbox"/> DELETE	13.16 CITY-ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.17 NAME	<input type="checkbox"/> DELETE	13.17 TITLE	
12.18 NAME	<input type="checkbox"/> DELETE	13.18 NAME	
12.19 NAME	<input type="checkbox"/> DELETE	13.19 STREET ADDRESS	
12.20 NAME	<input type="checkbox"/> DELETE	13.20 CITY-ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 19.07(3)(k), Florida Statutes. I further certify that the information included 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 oath. 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.

SIGNATURE: *David R. Marvel*
DAVID R. MARVEL

1/18/95 813-535-4368

CR2E034 (12/95)