2008 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # N06507

1. Entity Name



FILED Jan 23, 2008 8:00 am Secretary of State

01-23-2008 90006 017 ****70.00

INCAN AIN	SINTING INTERNATIONAL	WINTOTT CO, INC.						
9833 SIBBALD ROAD 98		Mailing Address 9833 SIBBALD ROAD JACKSONVILLE, FL 32208						
2. Principal Place of Business - No P.O. Box #		3. Mailing Address					DI CIRI BIRI BIBLI CIRI BI	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01152008 Ch	ıg-NP	CR2E037 (12/06)	
City & State		City & State			4. FEI Number 52-137494	7	├	pplied For lot Applicable
Zip	Country	Zip	Country		5. Certificate of Sta	atus Desired	\$8.75 Ad Fee Requir	
6. Name and Address of Current Regist		egistered Agent	<u> </u>		7. Name and Address of New Registered Agent			
WADE, ARTHUR E. REV.			Name		- 			
838 TAMMY COVE LANE JACKSONVILLE, FL 32218			Street Addres		O.O. Box Number is N	lot Acceptable)		
			City				₽ ∎ Zip Coo	de
							TL	
	named entity submits this statement for iions of registered agent.	the purpose of changing its re	gistered office or	registere	ed agent, or both, in	the State of Florid	da. I am familiar with	, and accept
								i
SIGNATURE .	Signature, typed or printed name of registered agent an	d title d applicable. (NOTE: F	legistered Agent signati	ute required	when reinstating)		DATE	
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution.						
	_	1	•		\$5.00 May Be Added to Fees		te check payable a Department of S	
10.	Due by May 1, 2008 OFFICERS AND DIRE	Trust Fund Co	•	<u> </u>	Added to Fees	Florid		State
TITLE	OFFICERS AND DIRE	Trust Fund Co	11.	<u> </u>	Added to Fees	Florid	a Department of S	State
	Due by May 1, 2008 OFFICERS AND DIRE	Trust Fund Co	ntribution.	<u> </u>	Added to Fees	Florid	AND DIRECTORS	N 10
TITLE NAME	OFFICERS AND DIRE P WADE, ARTHUR E.	Trust Fund Co	11. TITLE NAME	<u> </u>	Added to Fees	Florid	AND DIRECTORS	N 10
TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE	P WADE, ARTHUR E. 838 TAMMY COVE LANE JACKSONVILLE, FL VP	Trust Fund Co	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	<u> </u>	Added to Fees	Florid	AND DIRECTORS	N 10
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I nereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. ARTHUR E. WADE