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

	MEN 1 # P940(CH MANUFACTURING, IN	0028867 (7) c.			
Principal Place of Business		Mailing Address		- I COMPANY CHA TARLE BIGGE BACKE BACKE BACKE BACKE	18 11881 18101 18118 81111 1881 1881
400 VENTURE DR		P.O. BOX 290632			
SUITE D		PORT ORANGE FL 32129-0632			
SOUTH DAYTONA FL 32119 US				DO NOT WRITE IN THIS SPACE	
00				3, Date Incorporated or Qualified	
a Principal P	Place of Business	2a. Mailing Address		04/14/1994 4. FEI Number	Tanalia Fa
21 26		-		59-3238054	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		",	¢0.75
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zφ	Country	8. This corporation owes or has paid the	
24	[25]		30	Personal Property Tax due June 30.	Yes No
9 Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent WIND ELAINE 81 Name					
KINION, ELAINE			81 Name		
981 BRAMBLE BUSH CIRCLE EAST			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
PORT ORANGE FL 32127			83		_
			84 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508. Florida Statute	s. the above-named corr		
office or r	registered agent, or both, in the Standard accept the ob-	ate of Florida. Such change was at	uthorized by the corpora	poration submits this statement for the purpo- tion's board of directors. I hereby accept the	appointment as registered
	an i g iliniai wice, tini accept the or	ingulioris di, decilori 607.0000, Flor	nda olajoles.		
SIGNATURE	Signature, typod or printed name of registered	APOTE: NOTE: applicable (NOTE:	Registered Agent signature requ	red when re-instating) DA	ATE
12.		ND DIRECTORS	13,	ADDITIONS/CHANGES TO OFFICERS	
TITLE	PT CONTRACTOR	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	KINION, ELAINE		1.2 NAME		
STREET ADDRESS	981 BRAMBLE BUSH CR E		1.3 STREET ADDRESS		
CITY-ST-ZIP	PT ORANGE FL VS	DESCRIP	1.4 CITY-ST-ZIP		
TITLE	KINION, KEVIN	∐ DELÉTE	21 TITLE		L. Change L. Addition
NAME	981 BRAMBLE BUSH CR E		2.2 NAME		
STREET ADDRESS	PT ORANGE FL		2.3 STREFT ADDRESS	,	i
CITY-ST-ZIP TITLE	TTOTATOLTE	DELETE	2.4 CITY-ST-ZIP 3.1 TITLE		Change Addition
NAME		[] OLCOID	3.2 NAME		C average C vacacion
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-SY-ZIP			3.4. City-St-ZiP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4 2 NAME		•
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELĒTE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	61 TITLE		Change
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
6177/ AT 100	1		■ a		

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 it changed, or on an attachment with an address.

FILED

May 06 1998 8:00am

Secretary of State