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PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000064050 (5)

ATZ IRRIGATION, INC.

FILED Feb 16 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address				ABOU BAILD AL	I	40 111 (0 90 1)
1115 FALCON RIDGE LN 1115 FALCON RIDGE LN								
PALM HARBO US	R FL 34683	PALM HARBOR FL 34683 US			DO NOT WRITE IN THIS SPACE			
03		Uõ	05		3. Date Incorporated or Qualified			
					08/26/1994	•		
2. Principal P	lace of Businoss	2a. Mailing Address			4. FEI Number		Ar	plied For
21 2391 Indian Trail E.		26 2391 Indian Trail E		E,	59-3265685			t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	X	\$8.75	Additional
22		27			U. Certificate of Status Desired	<i>y</i> z.x	Fee Re	equired
City & State		City & State			6. Election Campaign Financing	_	\$5.00 May Be	
23) Palm Harbor, FL		28 Palm Harbor FL Country		=	Trust Fund Contribution		Added	
24 346		29 34683 30 USA			 This corporation owes or has Personal Property Tax due Ju 			angible No
24 0.0	9. Name and Address of Current		U 01311		10. Name and Address of New I			3 140
7111	LO, THOMAS A JR.	•	-					
	100 00		12abeth K. Zi	<u> عالم</u>				
	15 FALCON RIDGE LN JM HARBOR FL 34683		82 Street 2.39	Addres	S (P.O. Box Number Is Not Accept		ι	
• • • • • • • • • • • • • • • • • • • •	83		SELECTION IT SELECTION	<u> </u>	ــــــــــــــــــــــــــــــــــــــ	,		
			04 04					
			84 City	m	Harbor	FL	85 Zip	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named cornoration 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 ELYGISH L. D.D.						1-20		<u> </u>
Signature typicon reinted name of registered agent and title if apprecable (NOTE: Registered Agent signature)					· · · · · · · · · · · · · · · · · · ·	DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFF	ICERS AND		
TITLE	VTS	DELETE	1.1 TITLE		S PTS	C-7 LJ	Change	Addition
NAME CZOSCZ ADDOSCO	ZULLO, THOMAS A JR. 1115 FALCON RIDGE LN		1.2 NAME	4 2	LULLO, EL12 AR	30/17I		
STREET ADDRESS CITY-ST-ZIP	PALM HARBOR FL		1.3 STREET ADDRESS	5	71 In dian To	3/4	0.2	
TITLE	TACM TRADOR FL	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	1-a	Im Harbor, Fl	<u>, smo</u>	☐ Change	Addition
NAME			2.2 NAME				C Ondingo	
STREET ADDRESS			2.3 STREET ADDRESS	1				
CITY-ST-ZIP			2. 4 CITY-ST-ZIP	1				1
TITLE		DELETE	3.1 TITLE	<u> </u>	-		Change	Addition
NAME			3.2 NAME					_
STREET ADDRESS			3.3 STREET ADDRESS					
CITY-ST-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		☐ DELETE	5.1 TITL€				☐ Change	☐ Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET ADDRESS					
CITY-ST-ZIP			5.4 CITY-ST-ZIP					
TITLE		☐ DELETE	6.1 TITLE				Change	Addition
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET ADDRESS					
CITY-ST-ZIP	ertify that the information supplied will	Abin Alice alone was a 199 ft of	6.4 CITY-ST-ZIP	<u>L</u>	-6 440.07(0)(5-5)	1.6 -41	204 . 21	
THE LIBRARY C								

Indicated on this annual report or supplied with this tiling does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or suppliemental 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 if changed, or on an attachment with an address

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(813) 786 -5227