


PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P97000065091

7. Corporation Name
ESPINAR, INC.

Principal Place of Business Mailing Address

121 W CLARK ST 121 W CLARK ST
 QUINCY FL 32351 QUINCY FL 32351

2. Principal Place of Business 2a. Mailing Address

21. **6860 W. Hwy 329** 26. **P.O. Box 1010**
 Suite, Apt. #, etc. Suite, Apt. #, etc.

22. **REDDICK, FL** 27. **FAIRFIELD, FL**
 City & State City & State

23. **32686 USA** 28. **32634-1010 USA**
 Zip Zip Country Country

24. 25. 29. 30.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
07/28/1997

4. FEI Number Applied For
59-3459289 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent

SHELFER, JAMES O
1300 THOMASWOOD DRIVE
TALLAHASSEE FL 32312

10. Name and Address of New Registered Agent

81. Name **BRUCE A. SHELFER**

82. Street Address (P.O. Box Number is Not Acceptable)
6860 W. Hwy 329

83. City **REDDICK** FL 85. Zip Code **32686**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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: *[Signature]* (NOTE: Registered Agent signature required when resigning) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	PVST	<input type="checkbox"/> DELETE
NAME	SHELFER, BRUCE A	
STREET ADDRESS	121 W CLARK ST	
CITY-ST-ZIP	QUINCY FL 32351	
TITLE	D	<input type="checkbox"/> DELETE
NAME	SHELFER, BRUCE A	
STREET ADDRESS	121 W CLARK ST	
CITY-ST-ZIP	QUINCY FL 32351	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PVST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	SHELFER, BRUCE A.	
1.3 STREET ADDRESS	6860 W. Hwy 329	
1.4 CITY-ST-ZIP	REDDICK, FL 32686	
2.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	SHELFER, BRUCE A.	
2.3 STREET ADDRESS	6860 W. Hwy 329	
2.4 CITY-ST-ZIP	REDDICK, FL 32686	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 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 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* 1-11-99 352-591-1299
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

95 MAR 22 PM 7:55
 SECRETARY OF STATE



CR2E034 (1/98)