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

DOCUMENT #

	FILEL)
Apr 21	1998	8:00am
Secre	tary o	f State

TROY	INDUSTRIES INC.				
Principal Plac	e of Business	Mailing Address			BIRK MIRKE MIRK BIRK BIRK MIRK MIRK INDI
1038 N.W.	21 TERR.	1038 N.W. 21 TERR.			
MIAMI FL 3	3127	MIAMI FL 33127		DO NOT WRITE IN	LTHIS SPACE
				3. Date Incorporated or Qualified	
				08/17/1961	
└	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-0932319	Not Applicable
Suite, Apt.	#, e1 c.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	<i>p</i>	City & State		O Clastica Constitution Financia	
23	· ·	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	This corporation owes or has paid	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
24	25	29	30	Personal Property Tax due June 30	
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Regis	
s	HAPIRO, STEVEN		81 Name		
	030 N.W. 96TH AVENUE		82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
] ₽	LANTATION FL 33322				
			83		
			84 City		85 Zip Code
					FL 3 Zip Code
office or r agent. La				poration submits this statement for the purplion's board of directors. I hereby accept t	
	Signature, typed or punted name of registered ag		Registered Agent signature requir		DATE
12.	PTD	ID DIRECTORS DOLLETE	13, 1.1 TILE	ADDITIONS/CHANGES TO OFFICER	Change Addition
NAME	SHAPIRO, BERNICE	E'D MALLE	1.2 NAME		
STREET ADDRESS	19925 N.E. 10 PL.WAY		1.3 STREET ADDRESS		
CITY-ST-ZIP	NO. MIAMI BCH FL		1.4 CHY+ST+7IP		
TITLE	VSM	DELETE	21 11111		Change Addition
NAME	SHAPIRO, STEVEN		2.2 NAME	•	
STREET ADDRESS	1030 N.W. 96TH AVE.		2.3 STREET ADDRESS		
CITY-ST-ZIP	PLANTATION FL		2. 4 CITY - ST - ZIP		
TITLE		DELETE	3 1 TILLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			33 STREET ADDRESS		
CITY-ST-ZIP			3 4. CFTY - S1 - ZIP		
TITLE		L DELETE	4.1 THLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - \$1 - ZIP		
TITLE		☐ DELETE	5.1 THUE	•	☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		DELFTE	5.4 CITY - ST - ZIP		Change Addition
TITLE		[_] tirriit	6.1 TITLE		La Change La Addition
NAME			6 2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

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 if changed, or on an attachment with an address.

CITY-ST-ZIP

BERNICE SHAPIRO

4/14/98

(305) 324-1742