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PROFIT CORPORATION ANNUAL REPORT



SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

•	1996		1115	DIV	ISION OF	CORPOR	RATIC	ONS						
 Corporation 	· •	2985			(5)									
FOWL	er indust	RIAL SALES	INC							TENT NAMENAMA	181 81111 811	iri biri biri	I BIAH BIBI	Badan Arana diana ia
Principal Place	of Business		N	failing Addres		· 								
C/O ROBERT W FOWLER 400 LEVY ROAD ATLANTIC BEACH FL 32233				C/O ROBERT W FOWLER 400 LEVY ROAD ATLANTIC BEACH FL 32233										
									3. Date Inc.	orporated or Qu '09/1965	ualified	3a . Da	te of Last I 02/10/	Report 1995
2. Principal Pla	ce of Business		2a 26	. Mailing Add	dress				4. FE≀ Num 50	ber 9-1105492		<u> </u>		Applied For
Suite, Apt. #	, etc.			Suite, Apt.	#, etc.					le of Status Dos	eired		\$8.7	Not Applicable 5 Additional
City & State			27	City & State	e			· · · · · · · · · · · · · · · · · · ·		·				Required
3			28							Campaign Finar nd Contribution	ncing			00 May Be ed to Fees
Zip ·	25	Country	29	Zip		30 Cou	untry		8. This corp Florida S	oration has liab	ility for in		ax under s	199.032,
	9, Name and	Address of Curre	ent Regis	stered Agen	t	1441				nd Address of			Agent	
FOWLE	R. I.R.						81	Name						
400 LE	VY ROAD						82	Street Add	dress (P.O. Box N	uniber is Not Ad	cceptable	e)		***************************************
atlan	TIC BCH. FL 3	2233					83					·····		
							LI.							
							84	City				-	[85 Z	ip Code
Pursuant to registers	the provisions o	f Sections 607.050	02 and 60	7.1508, Flori	da Statutes	s, the abo	ł	•	oration submits thi	s statement for	the purp	FL xose of ch		•
Pursuant to or registerer familiar with	o the provisions o d agent, or both, n, and accept the	f Sections 607.050 in the State of Flo obligations of, Sec	02 and 60 rida. Such ction 607.	07.1508, Flori n change was 0505, Florida	da Statutes s authorize a Statutes.	s, the abo	ł	•	oration submits thi ard of directors. I I	s statement for hereby accept the	the purp he appoi	xose of chintment as		•
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