FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mar 09 1998 8:00am **PROFIT** FLQRIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State **ANNUAL REPORT** Secretary of State **DIVISION OF CORPORATIONS** 1998 DOCUMENT # 341119 (6) NAUMAN INDUSTRIES INC Principal Place of Business Mailing Address 3717 S DIXIE HWY. 3717 S DIXIE HWY. P O BOX 6815 P O BOX 6815 DO NOT WRITE IN THIS SPACE W PALM BCH FL 33405 W PALM BCH FL 33405 3. Date Incorporated or Qualified 02/05/1969 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1287812 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Zip Country 8. This corporation owes or has paid the current year Intangible No. 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent NAUMAN, NANCY 3717 \$ DIXIE HWY Street Address (P.O. Box Number is Not Acceptable) 82 **WEST PALM BEACH FL 33405** 83 City Zip Code 85 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Addition 1.1 TITLE Change TITLE NAUMAN, NANCY NAME 1.2 NAME 3717 SOUTH DIXIE HIGHWAY STREET AODRESS 1.3 STREET ADDRESS **WEST PAM BEACH FL 33405** 1.4 CITY-ST-ZIP CITY-ST-ZIP Change DELETE Addition 2.1 TITLE TITLE BUETTNER, SUZANNE N NAME 2.2 NAME 1408 ALPHA COURT SOUTH STREET ADDRESS 2.3 STREET ADDRESS **WEST PALM BEACH FL 33406** 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE FOOSE, KARL J 3.2 NAME NAME 4100 SOUTH DIXIE HIGHWAY 3.3 STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL 33405 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 City-St-7iP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE **5.2 NAME** NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change __ Addition TITLE 6.1 TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 City-ST-ZIP

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.

A. Nauman

CITY-ST-ZIP

FILED