FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 341638 (5)

1. Corporation Name
INDUSTRIAL AND VALVE SERVICES INC

Principal Place of Business	Mailing Address
93 ABALONE LN E P O BOX 564 PONTE VEDRA BEACH FL 32082 US	93 ABALONE LN E P O BOX 564 PONTE VEDRA BEACH FL 32082 US

95 [illegible] 36
[illegible]

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/13/1969	3a. Date of Last Report: 04/29/1994
4. FEI Number: 59-1264516	Applied For / 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 has liability for intangible tax under s. 199.032 Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

YARBROUGH,BOBBY G
93 ABALONE LANE EAST
PONTE VERDA BEACH FL 32082

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 [illegible]

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	TD	☐ Change ☐ Addition
NAME	YARBRUOUGH, JUDITH E	
STREET ADDRESS	93 ABALONE LANE E	
CITY-ST-ZIP	PONTE VEDRA BCH, FL00000	
TITLE	SD	☐ Change ☐ Addition
NAME	YARBROUGH, BOBBY G	
STREET ADDRESS	93 ABALONE LANE E	
CITY-ST-ZIP	PONTE VEDRA BCH, FL00000	
TITLE	SDP	☐ Change ☐ Addition
NAME	YARBROUGH,BOBBY G	
STREET ADDRESS	93 ABALONE LANE E.	
CITY-ST-ZIP	PONTE VERDA BCH FL	
TITLE		☐ Change ☐ Addition
NAME	MILTON BERMAN	
STREET ADDRESS	P.O. Box 2064	
CITY-ST-ZIP	JAX FLA 32206	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: Milton Berman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
MILTON BERMAN

4-27-95 904-353-3694

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