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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

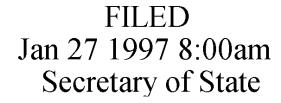
## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 371387

(2)

CLARK FINISHING COMPANY, INC.					
Principal Place of Business	Mailing Address				
2807 MERCY DR ORLANDO EL 32608	2807 MERCY DR ORLANDO FL 32808-3807				





UNLIANUU PL	32000	ONENHOO LE 25000-2007								
						3. Date Incorporated or Qualified	3a. Date of La	st Report		
						10/19/1970	01/24/199	<b>16</b>		
2. Principal P	lace of Business	2a. Mailing Address				4. FE Number		Applied For		
21		26				59-1303644		Not Applicable		
Suite, Apt. #, etc Suite Apt. #, etc.					5. Certificate of Status Desired	□ \$8.7	5 Additional			
22 27					b. Certificate of Status Desired	Fee	e Required			
City & State City & State					6. Election Campaign Financing	<b></b> \$5.	00 May Be			
23		28	<b>_</b>			Trust Fund Contribution	☐ Add	led to Fees		
Zip	Country	Z <sub>i</sub> ρ	<b>—</b>	ountry		8. This corporation has liability for it	· -	er s. 199.032,		
24	25	29	30			Florida Statutes	Yes No			
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent					
CLA	rk, robert S., Jr.			81 Name						
2807	7 MERCY DRIVE			82 Street Address (P.O. Box Number is Not Acceptable)						
ORL	ANDO FL 32808			ļ						
				83						
				84	Crty		FL 85	Zip Code		
44 0	to the one of Contone COZO	O2 and CO2 1509 Florida Ctat.	too tho	0000		rporation submits this statement for the p		na ita ragiatarad		
office or r	to the provisions of Sections 607.05 registered agent, or both, in the Sta im familiar with, and accept the obli	le of Florida, Such change was	authoriz	ed by	the corpor	ation's board of directors. I hereby accep	t the appointmen	t as registered		
SIGNATURE	and the first of the second	gest to oi, outstanding								
	Signature, typica or practed hance of registered a				nt signature req	uired when reinslating)	DATE			
12.	T	ND DIRECTORS	13		<del></del>	ADDITIONS/CHANGES TO OFFIC				
TITLE	V	☐ DELETE		TITLE			Char	nge [] Addition		
NAME	CLARK, JAMES			NAME						
STREET ADDRESS	1431 SUZANNE WAY				ADDRESS					
CITY-S1-ZIP	LONGWOOD FL			CITY-S	T-ZIP			1		
THLE	PT	☐ DELETE	4	TITLE	ļ		Char	nge [] Addition		
NAME	CLARK, ROBERT JR			NAME	ļ					
STREET ADDRESS	2807 MERCY DR				ADDRESS					
CITY - ST - ZIP	ORLANDO FL	T DELETE		4 CITY-S	ST - ZIP		T 05	To a deliberation		
TITLE	\$	☐ DELETE	- 1	TITLE	ļ		☐ Char	nge [_] Addition		
NAMÉ	CLARK, DIANNE M.			NAME	ļ					
STREET ADDRESS	2807 MERCY DR		3.3	STREET	ADDRESS					
CHY-ST-7IP	ORLANDO FL	DELEVE	_	CITY-	ST-ZIP		T o			
TITLE		☐ DELFTE		THILE			L Cha	nge [_] Addition		
NAME				2 NAME	\ \			j		
STREET ADDRESS			4.3	STREET	ADDRESS			ļ		
CiTY - ST - ZIP			_	CHY-S	T-ZIP			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
THE		∐ DELETE		TITLE			Cha	nge 🔲 Addition		
NAME				NAME						
STREET ADDRESS			5.3	STREET	ADORESS					
CITY-S1-7IP			5.4	CITY-S	T-ZIP					
TITLE		DELETE	6.1	TITLE			Cha	nge 🔲 Addition		
NAME			62	NAME.						
STREET ADDRESS			63	STREET	ADDRESS					
CHTY-ST-ZIP	<u></u>		6.4	CITY-S	T-ZIP		<del> </del>			
	the second control of the control of	transfer that the first of the contract of the	P. F AC			and in Constant 440 07(0)(i). Florida Ctatuta	_ 14	11-11-		

ed with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the Supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that If the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name information indicated on this annual report Lam an officer or director of the corporati appears in Block 12 or Block 13 if change

SIGNATURE:

SIGNATURE AND TYPE