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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 438130

STREET ADDRESS

CITY-ST-ZIP

PASS INDUSTRIES, INC.

Principal Plac	e of Business	Mailing Address			I (4414 alf24 II)hi (4161 4160 IIII) aan 6,614 alan alan alan alan alan
6207 28TH ST EAST 6207 28TH ST EAST					
BRADENTON F	L 342U3	BRADENTON FL 34203			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed
					10/15/1973
2. Principal P	lace of Business	2a. Mailing Address	_		4. FEI Number Applied For
21		26			59-1493784 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional
22		27	7		5. Certificate of Status Desired Fee Required
City & Stat	e	City & State	City & State		6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cou	ntry	8. This corporation owes the current year Intangible
24	25		30	_	Personal Property Tax.
	9. Name and Address of Curren	nt Registered Agent	-	04 No.	10. Name and Address of New Registered Agent
VET	TER, DONALD W			81 Name	,e
	2 BRD-AVE. WEST-			82 Stree	et Address (P.O. Box Number is Not Acceptable)
	DENTON FL 33505				6 Thirteenth Street West
MAG	DENTON PL 33303			83	The state of the s
	/			84 City	85 Zip Code
:	1	By the star of the	•	The process	THE WEST OF BUILDING WAS MADE OF THE CO.
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statut	es, the al	ove-name by the cor	ad corporation submits this statement for the purpose of changing its registered imporation's board of directors. I hereby accept the appointment as registered
agent. I a	am familia with, and accept the obliga	tions of Section 607.0505, Flo	rida Stati	ites.	ad corporation submits this statement for the purpose of changing its registered reporation's board of directors. I hereby accept the appointment as registered
SIGNATURE	* Tracy (V				2/////
OIOITITOTE	Signature, typed or printed name of registered ager			Agent signature	re required when reinstating) PATE
12.		NO DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	VD CONTRACTOR	☐ DELETE	1.1 111		
NAME	PADGETT, WILLIAM		1.2 N		
STREET ADDRESS				REET ADDRÉS	SS .
CITY-ST-ZIP	PORT CHARLOTTE FL	O RELETE		IY-ST-ZIP	Change Addition
TITLE	V	☐ DELETE	2.1 TV		Change Addition
NAME	OLISZEWSKI, MICHAEL		2.2 NA		ا ما ۱۹۱۹ ما میسیستانین لیم از با استفاده در باید ا
STREET ADDRESS			2.3 ST	REET ADDRES	SS
CITY-ST-ZIP	BRADENTON FL		_	TY-ST-ZIP	☐ Change ☐ Addition
TITLE	PD	☐ DELETE	3,1 TI		Cliarige Addition
NAME	PADGETT, AGNES		3.2 N		
STREET ADDRESS				REET ADDRES	ss
CITY-ST-ZIP	PORT CHARLOTTE FL			TY-ST-ZIP	☐ Change ☐ Addition
TITLE	V	☐ DELETE	4.1 TT		☐ Change ☐ Addition
NAME	HYNDMAN, JOHN M		4, 2 N		
STREET ADDRESS			4.3 \$1	REET ADDRES	SS (
CITY-ST-ZIP	PORT CHARLOTTE FL	——————————————————————————————————————		TY-ST-ZIP	
TITLE	ST	☐ DELETE	5.1 TI		☐ Change ☐ Addition
NAME	STANISH, SANDRA		52 N		
STREET ADDRESS				REET ADDRES	SS
CITY-ST-ZIP	BRADENTON FL			TY-ST-ZIP	
TITLE		☐ DELETÉ	6.1 TI	ΠE	☐ Change ☐ Addition

14. I hereby 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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

Mar 05, 1999 8:00 am Secretary of State

03-05-1999 90011 042 ***150.00

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