## PROFIT CORPORATION ANNUAL REPORT 1999



## FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1999 DOCUMENT # 442699

•	OU. po.										
	PAUL	'S	PARTS	&	EQUIPMENT.	CO.					

PAUL'S	PARIS & EQUIPMENT, GU	•										
Principal Plac	e of Business	Mailing A	viddress				- 1 1981W MCGTT BIBIT 1191A BILLIA 1	AYAN CARCAMINA S	tiani didil diner	MTETE MINH INTE		
212 NORTH BARFIELD HWY. PAHOKEE FL 33476  212 NORTH BARFIELD HWY. PAHOKEE FL 33476							DO NOT WRITE IN THIS SPACE					
							3. Date Incorporated or Qualifed	TEIN IBIS	SPACE		٦	
							01/28/1974	· .			]	
2. Principal P	tace of Business	2a, Maitin	g Address				4. FEI Number		Ar	pplied For	_[_	
21		26					59-1142599		No.	ot Appticable	╛	
Suite, Apt.	#, etc.	<u> </u>	Suite, Apt. #, etc.				5. Certificate of Status Desired   \$8.75 Additional Fee Required					
City & Stat	9	<del></del>	City & State				6. Election Campaign Financing		\$5.00	May Be	1	
23		28	<del></del>				Trust Fund Contribution		·	to Fees		
Zip	Country	Zip	·	Cour	ntry		8. This corporation owes the curr	ent year int	angible	1.	7	
24	25	29	[3	30			Personal Property Tax.	-	Yes	⊠No _	J	
	9. Name and Address of Current	Registered		•			10. Name and Address of New I	Registered	Agent		]	
					81	Name						
SAS 212		-	82	Street Addre	ess (P.O. Box Number is Not Accept	able)		<del>_</del> _	1			
	OKEE FL 33476			ł	83						1	
				f	84	City		FL	85 Zip (	Code	1	
office or r agent. I a SIGNATURE	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligati Signature, typed or printed name of registered agent					the corporation		of the appoi	ntment as re	gistered		
12.	OFFICERS AND	DIRECTOR	s	13.			ADDITIONS/CHANGES TO OF	FICERS AN	ID DIRECTO		] }	
TILE	VD .	'	DELETE	1,1 TFT	Æ				Change	☐ Addition		
NAME	SASSER, JAMES P.			1.2 NA	Æ						1:	
STREET ADDRESS	212 N. BARFIELD HWY.			1.3 STR	EET	ADDRESS		1				
CITY-ST-ZIP	PAHOKEE FL			1.4 CFD	Y-ST	r-23P					Já	
TITLE	PD		☐ DELETE	21 TFL	E				Change	Addition	7	
NAME	SASSER, FAITH			22 NA	Æ						1	
STREET ADDRESS	212 N BARFIELD HWY			2.3 STR	EET	ADDRESS					1	
CITY-ST-ZIP	PAHOKEE FL 00000			2.4 CT							l	
TITLE	ST :		X DELETE	3.1 Tm		·			☐ Change	☐ Addition	1	
NAME	LASSITER, EUGENE S		<i>/</i> `	3.2 NAS	Æ	1	•					
STREET ADDRESS	437 BACON POINT RD			3.3 STR	EET.	ADDRESS					i	
CITY-ST-ZIP	PAHOKEE FL 33476			3.4. CIT	Y- ST	T-ZZP				_		
TITLE			☐ DELETE	4.1 TITL	£	$\overline{}$			☐ Change	Addition	1	
NAME				4. 2 NA	ME	1					1	
STREET ADDRESS				4.3 STR	ŒT.	ADDRESS					1	
CITY-ST-ZIP				4.4 CIT							J	
TITLE			☐ DELETE	5.1 TITL	_				Change	Addition	1	
NAME				52 NA	€						1	
STREET ADDRESS				1	•	ADDRESS						
CITY-ST-ZIP				5.4 CITY		-ZP					1	
TITLE			☐ DELETE	6.1 TITE	E.				Change	☐ Addition	1	

62 NAME

6.3 STREET ADDRESS

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 supplier antal annual report is true and accurate and that my signature shell have the same legal effect as if made under eath; that I am an officer or director of the corporation or the heteceiver or trustee empowered to execute this 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.

SIGNATURE

NAME

STREET ADDRESS

THE AND TOPE OF PRINTED NAMED PROMISE OF PIECE OF DIRECTOR

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90237 022 \*\*\*150.00

**—**:i= =:: =:=:  $\equiv \tilde{x}^{1/2} \cdot \tilde{x}^{1/2}$ 

 $\equiv$ 

Ξ