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

PROFIT CORPORATION ANNUAL REPORT

1999

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 445159

FILED Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90001 008 ***158.75

ŞNYDER	INDUSTRIES, INC.							
Principal Place	e of Business	Mailing Address			-	<u> </u>	111) HIBN 1731	
1442 SE 137H ST FT LAUDERDALE FL 33316 US 1442 SE 137H ST FT LAUDERDALE FL 33316 US US					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed			
					02/01/1974			
Principal Place of Business 2a. Mailing Address					4. FEI Number		plied For	
21 26					59-1511693	\$8.75 A	t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	Fee Re		
22 City & State	e	City & State			6. Election Campaign Financing	\$5.00		
23		28			Trust Fund Contribution	Added t		
Zip	Country 25	Zip 29 3	Country		This corporation owes the current ye- Personal Property Tax.	ar Intangible	½ N₀	
	9. Name and Address of Current				10. Name and Address of New Registe	ered Agent		
SNYDER, (MARK) 1442 SE13TH ST FT LAUDERDALE FL 33316			81 82 83	Name Street Addre	ess (P.O. Box Number is Not Acceptable)			
			84	City		FL 85 Zip C	Code	
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Algorithms by description of registered agent and title il applicable. (NOTE: Registered Agent signature in the state of Florida in the corporagent in the corporagen								
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICER	S AND DIRECTO	RS IN 12	
TITLE	S DELETE		1.1 TITLE			☐ Change	☐ Addition	
NAME	Sitt Bert, (in a tit)		1.2 NAME				- (
STREET ADDRESS	=== ::= :::== :		1.3 STREET ADDRESS					
CITY-ST-ZIP			1.4 CITY-S	T-ZIP		Change	Addition	
TITLE	·		2.1 TITLE			□ Cilarige	[] Youngin	
NAME STREET ADORESS			2.2 NAME 2.3 STREE	r ADDRESS				
CITY-ST-ZIP			2.4 CITY-S					
TITLE			3.1 TITLE			☐ Change	Addition	
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREET	T ADDRESS				
CITY-ST-ZIP			3.4 CITY-S	T-ZIP				
TITLE		☐ DELETE	4.1 TITLE	ĺ	•	Change	☐ Addition	
NAME			4. 2 NAME				{	
STREET ADDRESS			4.3 STREET					
CITY-ST-ZIP TITLE			4.4 CITY-S 5.1 TITLE	T-ZIP		☐ Change	Addition	
NAME			5.2 NAME			_ · · •		
STREET ADDRESS			5.3 STREET	ADDRESS				
CITY-ST-ZIP			5.4 CITY-S	T-ZIP				
TITLE		☐ DELETE	6.1 TITLE			☐ Change	Addition	
NAME			6.2 NAME					

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.

6.4 CITY-ST-ZIP

NAZACIO President 1/5/99 **SIGNATURE**

6.3 STREET ADDRESS