Jun 08, 1999 8:00 am

Secretary of State

06-08-1999 90012 028 ***550.00

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 449951

1. Corporation Name

KARRGO INDUSTRIES, INC.

Principal Place of Business Mailing Address							.,		
416 1/2 N. ORA DELAND FL 327 US		425 W. PENNSYLVANIA AVENUE DELAND FL 32720 US				DO NOT WR	ITE IN THIS	SPACE	
03		00			3. Date Incor 04/08/19	oorated or Qualifed			
2. Principal Place of Business 1537 CLD DAYTONA CIRCLE 21 DELAND, FL 32724 26 26					4. FEI Numb 59-1533			Not	plied For t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate	of Status Desired		\$8.75 A Fee Red	
City & State	AND FL	City & State				ampaign Financing Contribution		\$5.00 Added to	· · · · · · · · · · · · · · · · · · ·
Zip 24 327	24 25 USA		Country 30		Personal F	his corporation owes the current year Intangible ersonal Property Tax. Yes No lame and Address of New Registered Agent			
	9. Name and Address of Current	t Registered Agent		M	10. Name and	Address of New	Registered /	Agent	
RICH	IARD A. FLANIGAN		81	Name					
425 W. PENNSYLVANIA AVENUE DELAND FL 32720			82	Street A	et Address (P.O. Box Number is Not Acceptable)				
			83						
			84	City	·		FL	85 Zip C	Code
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida. Such change was au	ithorized by	the corpo	corporation submits the ration's board of direct	is statement for the ctors. I hereby acce	purpose of pt the appoin	changing its ntment as req	registered gistered
SIGNATURE							DATE		
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Regi 12. OFFICERS AND DIRECTORS				it signature re	quired when reinstating) ADDITIONS	CHANGES TO OF		D DIRECTO	RS IN 12
TITLE	VD OF TREETS AN	DELETE	13.		11221113111	,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		Change	☐ Addition
NAME	FLANIGAN, RICHARD J		12 NAME			a=0 PA		•	
STREET ADDRESS	4040 740 WATERFORD VALLEY CIRCLE			r ADDRESS	11808 OLD CHARLOTTE	TIMBER NO	0/4		
			1.4 CITY-S	T-ZIP	CHARLOTTE	NC 28	'26 T		
TITLE	D	☐ DELETE	2.1 TITLE			7		☐ Change	Æ } Addition
NAME	PAIVA, KATHLEEN M		2.2 NAME						
STREET ADDRESS	DDRESS 2160 WILMHURST RD. 2.3			TADDRESS	70701	`			ļ
CITY-ST-ZIP			2. 4 CITY-5	T-ZIP	32720	<u>/</u>			F77 4 3 191
TITLE	PD	☐ DELETE	3 1 TITLE					☐ Change	Addition
NAME	FLANIGAN, RICHARD A		3.2 NAME						
STREET ADDRESS	425 W. PENNSYLVANIA AVENU	JE	3.3 STREE	TADDRESS	カックへ	n			
CITY-ST-ZIP	DELAND FL		3.4. CITY-9	T-ZIP	32720			Channe	(D) Addition
TITLE	SD	☐ DELETE	4.1 TITLE					Change	Addition
NAME	FLANIGAN, ALICE J	42	4. 2 NAME						
STREET ADDRESS	425 W. PENNSYLVANIA AVENU	JE	4.3 STREE		ウィマュ	0			
CITY-ST-ZIP	DELAND FL	T part the	4.4 CITY-S	T-ZIP	3272	<u> </u>		Change	Addition
TITLE		☐ DELETÉ	5.1 TITLE 5.2 NAME					□ \mange	
NAME	l .		3.2 NAME						ı

CITY-ST-ZIP 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.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY+ST-ZIP

5.4 CITY- ST- ZIP

6.1 TITLE

6.2 NAME

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

DELETE

5-37-99 904-822-9781 Date Daytime Phone #

Change

☐ Addition