FILE NOW: FILING FEE AFTER MAT 101 10 \$000.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 452 452 (6) JOK

1. Corporation Name

CENTURY TESTING SERVICE, INC.

Suite, Apt. #, etc.

Principal Place of Business

2103 GILMORE ST. JACKSONVILLE FL 32204

2. Principal Place of Business

Mailing Address

2103 GILMORE ST. JACKSONVILLE FL 32204

Mailing Address

Suite, Apt. #, etc.

City & State

26

27

SAME

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

05-10-1999 90267 035 ***150.00

DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Not Applicable

3. Date incorporated or Qualifed

5. Certifcate of Status Desired

6. Election Campaign Financing

4. FEI Number

City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 Mi Added to i	
	Country		ountry	8. This corporation owes the current year in		
Zip i Zoo o	. —	29 30	ouna y	Personal Property Tax.		3 No
3220	9. Name and Address of Curre	11		10. Name and Address of New Registered	Agent	
	9. Name and Address of Curre	IN Registered Agent	81 Name			
SELLE	ERS, HERBERT S, III					
6063 KINGSLEY LAKE DRIVE STARKE 32091			82 Street Address (P.O. Box Number is Not Acceptable)			
			83			
			84 City	FI	85 Zip Co	ode
	of Section 607.00	502 and 607 1608 Florida Statutes the	above-named corr	poration submits this statement for the numose of	f changing its re	egistered
office or re	agretored agent or both in the Stat	te of Florida. Such change was authorities of Section 607.0505, Florida S	zed by the corborati	on's board of directors. I hereby accept the appo	iintment as regi	stered
SIGNATURE				ed when reinstating) DATE		
	Signature, typed or printed name of registered a		ered Agent signature require	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	2S IN 12
12.			13. 1 TITLE	ADDITIONS/CHANGES TO OFFICERS F	☐ Change	Addition
TILE	DV CELLEDG TODD A					_
NAME	SELLERS, TODD A		2 NAME			
STREET ADDRESS	2103 GILMORE ST.		3 STREET ADDRESS			1
CITY-ST-ZIP	JACKSONVILLE, FL 00000		.4 CITY-ST-ZIP		Change	Addition
TITLE	OP		I TITLE		_ sege	
NAME	SELLERS, HERBERT S, III		2 NAME		•	1
STREET ADDRESS	2103 GILMORE ST.	1	2.3 STREET ADDRESS		•	1
CITY-ST-ZIP	JACKSONVILLE, FL 00000		2. 4 CITY-ST-ZIP		Change	Addition
TITLE			LI TITLE		Change	
NAME		<u>.</u>	3.2 NAME			
STREET ADDRESS			3 STREET ADORESS			
CITY-ST-ZIP	·		3 4. CITY-ST-ZIP		Change	Addition
TITLE	DST	☐ DELETE	41 πLE		Change	
NAME	KOOB, KATHLEEN R.		4.2 NAME			İ
STREET ADDRESS	2103 GILMORE ST.	1	4.3 STREET ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL		4 4 CITY-ST-ZIP			Addition
TITLE	DV		5.1 TITLE		Change	
NAME	SELLERS, TANA L.	Till the state of	5.2 NAME			
STREET ADDRESS		9.	5.3 STREET ADDRESS			. 1
CITY-ST-ZIP	JACKSONVILLE FL		5.4 CITY-ST-ZIP		CT Change	Addition
inte		☐ DELETE -	6.1 TITLE		Change	Addision
NAME		3	6.2 NAME			
STREET ADDRESS	s	7	6.3 STREET ADDRESS			
CITY-ST-ZIP	<u> </u>		6.4 CITY-ST-ZEP			information
				n Section 119.07(3)(i), Florida Statutes, I further ure shall have the same legal effect as if made united by Chapter 607. Florida Statutes; and the		
officer a	c director of the corneration of the I	receiver or trustee empowered to executate and according receiver or trustee empowered to executachment with an address, with all off	ure inis report as rec	quired by Chapter 607, Florida Statutes; and that	it my name app	lears in