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

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

6300 HIGH RIDGE RD

LAKE WORTH FL 33462

Suite, Apt. #, etc.

City & State

23 Zip

24

2. Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

(3)

Mailing Address

2a, Mailing Address

City & State

Ζφ

Suite, Apt. #, etc.

26

27

29

6300 HIGH RIDGE RD

LAKE WORTH FL 33462

POMPANO SILICA AND SAND, INC.

Country

WORLD EXECUTIVE BUILDING SUITE 290

9. Name and Address of Current Registered Agent

25

3500 NORTH STATE ROAD 7

LAUDERDALE LAKE FL 33319

WEITZ, JEFFREY L

| 1 | TILEL |) |
|--------|--------|---------|
| Apr 23 | 1998 | 8:00am |
| Secre | tary o | f State |

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| DO NOT WRITE IN THIS SPACE | | | | | | |
| 3. Date Incorporated or Qualified | | | | | | |
| 10/23/1975 | | | | | | |
| 4. FEI Number | | Applied For | | | | |
| 59-1930857 | | Not Applicable | | | | |
| 5. Certificate of Status Desired | | \$8.75 Additional Fee Regulred | | | | |
| Election Campaign Financing Trust Fund Contribution | | \$5.00 May Be Added to Fees | | | | |
| This corporation owes or has pa Personal Property Tax due June | | current year Intangible X Yes No | | | | |
| 10 Name and Address of New Dr | aletoro | d Acent | | | | |

Zip Code

85

Street Address (P.O. Box Number is Not Acceptable)

11 Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the

Country

81

83

84 City

30

| SIGNATURE , | Signature, typed or printed name of registered agent and title if | | | | | |
|---------------|---|-------------|---|------------------------|----------|---------|
| | | | TE: Registered Agent signature required v | ··············· | DATE | 5.11.16 |
| 2. | OFFICERS AND DIRECT | | 13. | ADDITIONS/CHANGES TO C | | |
| TLE | VS | DELETE | 1.1 1tTL€ | | ☐ Change | Additio |
| WE | TSIOTIS, PAUL G | | 1.2 NAME | | | |
| REET ADDRESS | 2741 NE 47TH STREET | | 1.3 STREET ADDRESS | | | |
| TY-ST-ZIP | LIGHTHOUSE PT, FL 00000 | | 1.4 CITY - S1 - ZIP | | | |
| rle | PT | ☐ DELETE | 2.1 TITLE | | ☐ Change | Additio |
| WE | TS IOTIS, GEORGE P | | 2.2 NAME | | | |
| REET ADDRESS | 4220 BAYVIEW DRIVE | | 2.3 STREET ADDRESS | | | |
| TY-\$T-ZIP | FT LAUDERDALE, FL 00000 | | . 2.4 CITY-ST-ZIP | | | |
| LE | - | DELETE " | 3.1 TITLE | | ☐ Change | Additio |
| ME | | | 3.2 NAME | | | |
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| AME | | | 6.2 NAME | | | |
| TREET ADDRESS | | | 6.3 STREET ADDRESS | | | |
| TV AT 140 | _ | | 4 4 0 Ft DT 740 | | | |

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 trusted empowered to by occure 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.