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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 509267

(1)

ACTION BOLT & TOOL CO., INC.

FILED									
Jan 22 1997 8:00am									
Secretary of State									

Principal Place of Business Mailing Address						- I LOBINI BIINI MANIA HANN HAND WANC HUR	i Bibil Bibil B	1011 040 21 310 11	#1811 (# #1
212 NEWMAN ROAD 212 NEWMAN ROAD P.O. BOX 12156 P.O. BOX 12156			12156						
LAKE PARK FL	. 33403	LAKE PARK FL 33403-01	56						
						3. Date Incorporated or Qualified 07/08/1976		te of Last Re 2 4/1996	eport
2 Principal Pr	ace of Business	2a. Mailing Address				4. FEI Number	1 0 1/1		allast Fac
	age of Business	26				59-1680201		——————————————————————————————————————	plied For
Suite, Apt	# etc	Suite, Apt. #, etc.		*****		00 1000201		\$8.75	t Applicable
22	,,, 5.0	27				5. Certificate of Status Desired		Fee Re	
City & State)	City & State				6. Election Campaign Financing		\$5.00	May Ro
23		28			•	Trust Fund Contribution		Added t	
Zip	Country	Zip	Zip Country			8. This corporation has liability for intangible tax under s. 199.032,			
24	25	29	30			Florida Statutes Yes No			
	9. Name and Address of Cur	rent Registered Agent				10. Name and Address of New Re	gistered /	lgent	
	LER, ROBERT J.		1	81	Name				
	B BORDEAUX COURT		ŀ	82	Street Addre	ss (P.O. Box Number is Not Acceptat) (a)		
PAL.	M BEACH GARDENS FL 3341	0	1						
			1	83					
			<u> </u>	84	City			85 Zip (Code
					· · · · · · · · · · · · · · · · · · ·		FL		
office or re	edistered agent, or both, in the Sti	ate of Florida. Such change was	authorized	i bv	the corporation	pration submits this statement for the pon's board of directors. I hereby acce	ourpose of ot the app	changing its ointment as	s registered registered
agent Fa	m familiar with, and accept the ob	ligations of, Section 607.0505, F	lorida Statu	utes.					
SIGNATURE									
12.	Signature, typed or printed name of registered OFFICERS A	AND DIRECTORS	13.	Agen	nt signature require	a when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE CERS AND	DIRECTOR	S IN 12
TITLE	P	DELETE	1,1 [1]	ı F		ADDITIONO OF A CONTROL OF A CON	ACTIO AND	Change	Addition
NAME	MULLER, R.J.		1.2 NA					C.III G.III.III	1.00
STREET ADDRESS	212 NEWMAN ROAD				ADDRESS				
CITY-ST-ZIP	LAKE PARK FL		1.4 C/I						
TITLE		DELETE	2.1 TIT	********	1.54			Change	Addition
NAME	MULLER, R L		2.2 NA	ME	1				
STREET ADDRESS	212 NEWMAN ROAD		2 3 ST	REET A	ADDRESS				
CITY-ST-ZIP	LAKE PARK FL		2 4 C						
TITLE	V	DELETE	3111					Change	Addition
NAME	MULLER, G T		3.2 NA	ME				•	
STREET ADORESS	212 NEWMAN ROAD		1		ADDRESS				
CITY-ST-2IP	LAKE PARK FL		3.4. CI	TY-SI	I-ZIP				
TITLE	\$	☐ DELETE	4.1 TIT	_			· · · · · · · · · · · · · · · · · · ·	Change	☐ Addition
NAME	KOCH, JEROME		4.2 N/	AME					
STREET ADDRESS	212 NEWMAN ROAD		4.3 ST	REET A	ADDRESS				
CITY-ST-ZIP	LAKE PARK FL		4.4 CR						
TITLE		☐ DELETE	5.1 TIT	•••••				Change	Addition
NAME			5.2 NA	ME.		-			
STREET ADORESS			5.3 ST	REET A	ADDRESS				
CITY-ST-ZIP			5.4 CIT						
TITLE		DELETE	6.1 TIT					Change	Addition
NAME			6.2 NA	ME					
STREET ADDRESS			l l		ADDRESS				
CITY-ST-7IP			6400						

14. I do 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.

SIGNATURE:

ROBERT L. MULLER

01/14/97

561-845-8800 Daytinie Phone #