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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 582474 1. Corporation Name

BORROUGHS MANUFACTURING CORPORATION

Principal Place	of Rusinosa	Mailing Address							
1402 SE 46TH		1402 SE 46TH LANE							
CAPE CORAL F	•	CAPE CORAL FL 33904				1			
0.00						DO NOT WRITE IN	THIS SPAC	E	
						3. Date Incorporated or Qualifed			
						08/16/1978			
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		App	plied For
21		26				59-1843285		Not	Applicabl
Suite, Apt.	#, etc.	Suite, Apt. #, etc.							dditional
22	سسروج سرشيسي فيدور		در چاستارچ	<u></u>	~	5. Certificate of Status Desired	F	ee Re	quired ~~~
City & State	e ·	City & State				6. Election Campaign Financing	\$5	5.00	May Be
23	•	28				Trust Fund Contribution	A	ded to	Fees
Zip	Country	Zip	Coun	try		8. This corporation owes the current ye	ar Intangible	,	
24	25	29	30			Personal Property Tax.	☐Ye	S	X No
	9. Name and Address of Curr	rent Registered Agent				10. Name and Address of New Regist	ered Agent		
				31	Name				
SER/	AVELLO, DOLORES		١,	32	D	ss (P.O. Box Number is Not Acceptable)			
206	S.E. 44TH TERRACE		l°	32	Street Addres	ss (P.O. Box Number is Not Acceptable)			
CAP	E CORAL, FL LP FL 33904		Į.	83					
			8	84	City		FL 85	Zip C	Code
44 5	6076	SERVICE STATE OF THE STATE STATE STATE	no the shi		named como	ration submits this statement for the purpo		ing its	registered
office or r	egistered agent, or both, in the Sta	ite of Florida. Such change was a	uthorized I	by ti	ne corporation	n's board of directors. I hereby accept the	appointment	as rec	gistered
agent. I a	m familiar with, and accept the obl	igations of, Section 607,0505, Flo	nda Statut	es.	_		11= 19	9	
SIGNATURE					SERAUEI		73//		
	Signature, typed or printed name of registered		Registered A	gent :	signature required	ADDITIONS/CHANGES TO OFFICER		FCTO	RS IN 12
12.		AND DIRECTORS	1.1 TITL	_		ADDITIONATOR TO CIT TO C.	. □CI		☐ Additi
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NAME	SERAVELLO, DOLORES		1.2 NAM						
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CITY-ST-ZIP	CAPE CORAL, FL 00000		1.4 CITY	_	ZIP				Addit
TITLE	VD	☐ DELETE	2.1 TITL	E			[_] 0:	anyc	[_] Audir
NAME	SERAVELLO, RALPH		2.2 NAV	E	1				
STREET ADDRESS	1211 SE 26TH TERRACE		2.3 STR	EET #	ADDRESS				
CTY-ST-ZIP	CAPE CORAL, FL 00000	The state of the s	2.4 CIT	Y-ST	ZIP				
TITLE		☐ DELETE	3.1 TITL	.E	1		C	ange	☐ Addit
NAME			3.2 NAM	Æ					
STREET ADDRESS			3.3 STR	EET A	ADDRESS				
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1 .	1				,				

FILED Apr 08, 1999 8:00 am Secretary of State

04-08-1999 90071 030 ***150.00



office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I nereby accept the appointment as registered agent, and accept the obligations of, Section 607-0505. Florida Statutor, Florida Statut	206	S.E. 44TH TERRACE		82	Stree	Address (P.O. Box Number is Not Acceptable)	
1. Pursuant to the provisions 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, am family with, and accept the obligations of, Section 607 0505. Floridas Statutes. Signature, Tymin, and accept the obligations of, Section 607 0505. Floridas Statutes. Dolores Sectuello Signature, Tymin, and accept the obligations of, Section 607 0505. Floridas Statutes. Dolores Sectuello OFFICERS AND DIRECTORS 113. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 The SERAVELLO, DOLORES THE SERAVELLO, DOLORES THE SERAVELLO, DOLORES THE VO SERAVELLO, RALPH 1211 SE 26TH TERRACE 12 STREET ADDRESS TYST-Zip THE SERAVELLO, RALPH 1211 SE 26TH TERRACE 12 STREET ADDRESS TYST-Zip DELETE 13 STREET ADDRESS TYST-Zip DELETE 14 TITLE 15 Change Additional Change Addit	CAPI	E CORAL, FL LP FL 33904		83	 		
1. Pursuant to the provisions of Sections 607 0502 and 607 1509. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607,0505. Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607,0505. Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607,0505. Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and accept the appointment as registered directors. I hereby accept the appointment as registered directors. I hereby accept the appointment as registered agent, and accept the appointment as registered agent, and accept the appointment as registered agent, and accept the obligations of, Section 607,0505. Florida Statutes, the accept agent and accept the appointment as registered agent and registered agent and accept the appointment as regis					L		
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Signature, Typed or primide numid of registered speet and vise if applicables. (NOTE: Repostered Appett signature required when reinstature) 2. OFFICERS AND DIRECTORS ILE PD	office or re	egistered agent, or both, in the State of Florida, Such	i change was auth	orized by	the con	d corporation submits this statement for the purpose of changing its reporation's board of directors. I hereby accept the appointment as reg	egistered istered
2. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 NE PD		7					
SERAVELLO, DOLORES 12 NAME				13.	_ <u></u>	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	RS IN 12
13 STREET ADDRESS 14 CMTY-ST-ZIP	TLE	PD	DELETE	1.1 TITLE		Change	☐ Addition
13 STREET ADDRESS 14 CMTY-ST-ZIP	AME	SERAVELLO, DOLORES		1.2 NAME			
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DELETE VD		CAPE CORAL, FL 00000		1.4 CITY-S	T-ZIP		
1211 SE 26TH TERRACE			DELETE	2.1 TITLE		☐ Change	Addition A
1211 SE 26TH TERRACE	ME	SERAVELLO, RALPH		2.2 NAME		1	
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AME			☐ DELETE	3.1 TITLE		☐ Change	Addition
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nty-ST-ZIP 6.4 City-ST-ZIP				6.3 STREE	TADDRES	3	
The state of the information		,		6.4 CITY- S	ST-ZIP		
4. 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	4 hosebuce	certify that the information supplied with this filing doe	s not qualify for th	e exempl	tion stat	ed in Section 119.07(3)(i), Florida Statutes. I further certify that the in	formation

CR2E034 (11/98)