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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 639311

(0)

**FILED** Apr 14 1998 8:00am Secretary of State

BELL A	NRCRAFT SALES & SERVI	ICE, INC.			
· ·		Mailing Address			iribit dinii ninii ninii ninii ninii inai
3915 ST. LUCIE BLVD FT PIERCE FL 34946		3915 ST. LUCIE BLVD FT PIERCE FL 34946			
11 1100 11	L 01010	THE TENDENE STORE		DO NOT WRITE IN TH	IS SPACE
				Date Incorporated or Qualified	
8 Principal D	lace of Business	1 9a Mailwa Addrona		10/10/1979 4. FEI Number	1 1
2. Principal P	INCH OF BUSINESS	2a. Mailing Address		59-1947288	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
<b>23</b> Zip	Country	7 <sub>ID</sub>	Country	Trust Fund Contribution	Added to Fees
24	25	29	30	8. This corporation owes or has paid the Personal Property Tax due June 30.	current year intangible  X Yes  No
	9. Name and Address of Curr			10. Name and Address of New Register	
BELL, JAMES			81 Name		
11855 APPALOOSA COURT			82 Street A	ddress (P.O. Box Number is Not Acceptable)	
PO	RT ST. LUCIE FL 34988		83		
			63		
			84 City	F	85 Zip Code
11. Pursuant	to the provisions of Sections 607,05	502 and 607.1508, Florida Statu	utes, the above-named o	corporation submits this statement for the purpose pration's board of directors. I hereby accept the a	
office or re agent. I a	egi <b>ste</b> red agent, or both, in the Stal m <b>fa</b> miliar with, and accept the obli	te of Florida. Such change was igations of, Section 607.0505, F	s authorized by the corpo Florida Statutes:	pration's board of directors. I hereby accept the a	ppointment as registered
SIGNATURE	•				
	Signature, typed or printed many of registered a		Dil Registered Agent signature re		
12.	VISC	ND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	<b>B</b> ELL, JAMES	<u></u>	1.2 NAME		
STREET ADDRESS	11855 APPALOOSA COURT	•	1.3 STREET ADDRESS		
CITY-ST-ZIP	PORT ST. LUCIE FL		1.4 CITY - ST - ZIP		
TITLE	P IONEO IAMEO M	DELETE	2.1 101.6		Change Addition
NAME	JONES, JAMES M 855 5TH PLACE		2 2 NAME		
STREET ADDRESS CITY-ST-ZIP	VERO BEACH FL		2 3 STREET ADDRESS		
TITLE		☐ DELETE	2 4 CHY-SI-ZIP 3 1 THLE		Change Addition
NAME			3,2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		1
CITY-ST-ZIP			3.4 CHY-ST-ZIP		
TITLE		[_] DELETE	4.1 TITLE		L Change L Addition
NAME CIRCLY ADDRESS			4. 2 NAME		
STREET ADDRESS CITY-ST-ZIP			4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		
TITLE		DELETE	51 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - \$1 - ZIP		
TITLE		DELEVE	61 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP		Sale All 1971	6 4 CITY-ST-ZIP	Lin Continu 110 07(2)(i) Florida Statutas I further	

Thereby certify that the information supplied with this ming does not quality 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 logal effect as if made under eath; 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 it changed, or on an attachment with an address.

561-464-7776