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

PROFIT CORPORATION **ANNUAL REPORT** 1998

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 833796

(6)

FILED Apr 13 1998 8:00am Secretary of State

Principal Place US HIGHWAY P.O. BOX 448 SYLVESTER G	OUILT BODY COMPANY, IN	Mailing Address US HIGHWAY 82 WES' P.O. BOX 448 SYLVESTER GA 31791	т	DO NOT WRITE IN T 3. Date Incorporated or Qualified 02/10/1975	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
1		26		59-0812955	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	θ	City & State		6. Election Campaign Financing	\$5.00 May Be
<u> </u>		28	T 6	Trust Fund Contribution	Added to Fees
Zip •	Country 25	Zip 29	Country 30	This corporation owes or has paid the Personal Property Tax due June 30.	current year Intangible
<u>11</u>	9. Name and Address of Curre		<u> </u>	10. Name and Address of New Registe	
32-	een, Howard P. 101 Pine Arbor Lane Ro Beach Fl. 32960		82 Street Ac 83	dress (P.O. Box Number is Not Acceptable)	85 Zip Code
SIGNATURE	ogistored agent, or both, in the State m familiar with, and accept the oblig Stgrature, typed or printed name of registered ag		s authorized by the corpo Florida Statutes.	orporation submits this statement for the purporation's board of directors. I hereby accept the	
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	TDS	DELETE	1.1 TITLE		Change Addition
KAME	DEVANE, JEAN		1.2 NAME		
TREET ADDRESS	RT 1 BOX 54 AIRPORT RD SYLVESTER, GA 00000		1.3 STREET ADDRESS		
ITY-ST-ZIP	VPD	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
AME	FERNANDEZ, ELIO M.	- Ductive	2.2 NAME		Chungo Chian
TREET ADDRESS	114 AIRPORT RD		2.3 STREET ADDRESS		
MY-ST-ZIP	SYLVESTER GA		2. 4 CITY-ST-ZIP		
TLE	GMD	DELETE	3.1 TITLE		☐ Change ☐ Additi
AME	DEVANE, VIC		3.2 NAME		
STREET ADDRESS	117 DEWBERRY LANE		3.3 STREET ADDRESS		
CITY-ST-ZIP	SYLVESTER GA	-	3.4. CITY-ST-ZIP		
ml£		☐ DELETE	4.1 TITLE		Change Addition
IAME			4. 2 NAME		•
TREET ADDRESS			4.3 STREET ADDRESS		
ITY-ST-ZIP		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
IAME		_ John I	5.2 NAME		TO OUT OF TO MODILITY
TREET ADDRESS			5.3 STREET ADDRESS		
XTY-ST-ZIP			5.4 CITY-ST-ZIP		
TILE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		_ -
STREET ADDRESS			63 STREET ADDRESS	graphical	
TTY-ST-ZIP			6.4 CITY-ST-ZIP	the Confession of the Confessi	
			for the exemption stated		

or the property of the corporation supplied with this ming does not qualify for the exemption stated in Section 119.07(3)(1). Florida Statutes, 1 further certify that the information indicated on this annual report or suppliemental 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 charged, or on, an attachment with an address.

912-776-6948