FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 AM 9:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **851620** **(5)**

1. Corporation Name

PETRO-CHEM EQUIPMENT CO.

Principal Place of Business	Mailing Address
8302 LAUREL FAIR CIRCLE STE 130 TAMPA FL 33610 US	1412 E 11 MILE ROYAL OAK MI 48067-026 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **01/16/1982**	3a. Date of Last Report: **04/06/1994**
4. FEI Number: **38-1848633**	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

SCHURR, DONALD K
1600 STELLA DR
SARASOTA FL 33581

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0402 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD	11 TITLE	☐ Change ☐ Addition
NAME	SCHURR, DONALD K, JR.	12 NAME	
STREET ADDRESS	159230 WYNDOVER	13 STREET ADDRESS	
CITY ST ZIP	TAMPA FL	14 CITY ST ZIP	
TITLE	PD	21 TITLE	☐ Change ☐ Addition
NAME	SCHURR, DONALD K	22 NAME	
STREET ADDRESS	1600 STELLA DRIVE	23 STREET ADDRESS	
CITY ST ZIP	SARASOTA, FL 00000	24 CITY ST ZIP	
TITLE	VP	31 TITLE	☐ Change ☐ Addition
NAME	SCHURR, SANDRA L	32 NAME	
STREET ADDRESS	1600 STELLA DRIVE	33 STREET ADDRESS	
CITY ST ZIP	SARASOTA, FL 00000	34 CITY ST ZIP	
TITLE		41 TITLE	☐ Change ☒ Addition
NAME		42 NAME	Director
STREET ADDRESS		43 STREET ADDRESS	Fred C. Pike
CITY ST ZIP		44 CITY ST ZIP	1412 E. 11 Mile Road
TITLE		51 TITLE	Royal Oak, MI. 48067-2026
NAME		52 NAME	☐ Change ☐ Addition
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is, to the best of my knowledge, true and accurate. 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: Fred C. Pike FRED C. PIKE 4/28/95 810 548 7122
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — DAYTIME PHONE NUMBER

0487049 FP