SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name

F93000004195 (4)

			_		
119	FNVIRC	NMFNTA	l R	INDUSTRIAL	INC

Principal Place	e of Business	Mailing Address		1 1981/198 1910 18109 11911 0 81111 \$9111 98111 99111 89111 8188 111 1881	
3003 HWY 77	7 SOUTH	653 W 23RD STREET			
LYNN HAVEN	I FL 32444	225			
US		PANAMA CITY FL 32405 US		3. Date incorporated or Qualified 3a. Date of Last Report	
				09/13/1993 05/25/1995	
	ace of Business	2a. Mailing Address		4. FEI Number Applied For	
	N. Santa Fe	26 P.O. Box 1	37 1 0	58-2032025 Not Applicable	
Suite, Apt.	#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional Fee Required	
City & State		City & State			
	oma City, OK	28 Oklahoma City, OK		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Country	This corporation has liability for intangible tax under s. 199.032,	
24 73114	25	29 73113-05103	0	Florida Statutes X Yes No	
	9. Name and Address of Cu			10. Name and Address of New Registered Agent	
C	T CORPORATION SYSTEM		81 Name		
	00 S. PINE ISLAND RD.		82 Street	82 Street Address (P.O. Box Number is Not Acceptable)	
PLANTATION FL 33324			AA WANG		
			83		
			84 City	85 Zip Code	
44 0		0500 and 607 1500 Florido Chat Ann	The share reprod	corporation submits this statement for the purpose of changing its registered	
office or re	egistered agent, or both, in the S	tate of Florida. Such change was auti	norized by the corp	corporation submits this statement for the purpose of changing its registered foration's board of directors. I hereby accept the appointment as registered	
agent Lai	m familiar with, and accept the o	bligations of, Section 607.0505. Florid	da Statutes		
SIGNATURE	Signature, typed or printed name of registere	d agent and the diagolicable (NOTE)	Repulariea Anent signature	e ray gred when reinstating) DATE	
12.		S AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	V	X DELETE	1 1 TITLE	P Change Addition	
NAME	KEMP, BILL		1.2 NAME	Terry L. Childers	
STREET ADDRESS	123 W. BALDWIN RD.		1 3 STREET ADDRESS	13415 N. Santa Fe	
CITY-ST-ZIP	PANAMA CITY FL		1.4 CITY - ST - ZIP	Oklahoma City, OK 73114	
TITLE	PDC	★ DELETE	2 1 TITLE	Change Addition	
NAME	MUNOZ, PHIL		2.2 NAME		
STREET ADDRESS	611 S BERTHE		2 3 STREET ADDRESS		
CiTY-ST-ZIP	PANAMA CITY FL		2 4 CITY - ST - ZIP	0 (10)	
TITLE	ST	▼ DELETE	3 1 TITLE	S/T Change X Addition	
NAME	MUNOZ, SUZI		3 2 NAME	Essie Childers	
STREET ADDRESS	611 S BERTHE		1	13415 N. Santa Fe	
CITY-ST-ZIP	PANAMA CITY FL	DELETE	3 4. CITY - ST - 7iP 4 1 TITLE	Oklahoma City, OK 73114	
TITLE			4 2 NAME	Change [] Rabited	
NAME STREET ADDRESS			4 3 STREET ADDRESS		
			4 4 CITY - ST - ZIP		
CHTY-ST-ZIP TITLE		DELETE	51 TILE	Change Addition	
NAME			5 2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5 4 CITY - ST - ZIP		
TITLE		DELETE	61 1INE	Change Addition	
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 C-TY - ST - ZIP		
14. I do herel	by certify that the information sup	optied with this filing is voluntarily furn	ished and does not	t qualify for the exemption stated in Section 119 07(3)(k), Florida Statutes. I true and accurate and that my signature shall have the same legal effect as if	
made und	der oath, that I am an officer of d	irector of the corporation or the receiv	ver or trustee empo	wered to execute this report as required by Chapter 617, Florida Statutes, and	
that my n	ame appears in Block 12 or Bloc	k 3 if changed, or on an attachment	with an address		

SIGNATURE: SIGNATURE NO Terry L. Childers 06/27/96 405-755-2200

- I (Băilaŭ klib iniĝa)(iki naji) baji) bajik nakk nakk naji) bijaŭ jajajo kujaj ajik laji.