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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9600003432 1. Corporation Name

STABLINE MEG., INC.

Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90226 037 ***150.00

Principal Place	e of Business	Mailing Address		+ 1921)00 1112 1216 21111 2211 3511 45111 3211 4	aina 11511 nidan 15115 5101 1891
P.O. BOX 4331 P.O. BOX 4331		P.O. BOX 4331			
HALFMOON NY 12065-0852 HALFMOON NY 12065-0852			DO NOT WRITE IN THIS	SPACE	
				3. Date Incorporated or Qualifed	
				07/05/1996	
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 P. O	Box 145	P. O. Box 1	45	14-1569443	Not Applicable
Suite, Apt.	#, etc	0.44- 0.44-		5. Certificate of Status Desired	\$8.75 Additional
22 DIA	MOND POINT	27 DIAMOND	POINT	3. Certificate of Status Desired	Fee Required
City & State		City & State City & State ORK	, N.Y.	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip.	Country	Zip	Country	8. This corporation owes the current year Int	angible
24 1282	24 Z5 WARREN	29 12824 - 30	WARREN_	Personal Property Tax.	Yes 🖺 No
	9. Name and Address of Current	t Registered Agent		10. Name and Address of New Registered	Agent
1/014	ADMVCKV COEIA		81 Name		
KOMARNYCKY, SOFIA			82 Street Addr	82 Street Address (P.O. Box Number is Not Acceptable)	
	S.E. 43RD ST., KINGS BAY				
UNE	ECHOBEE FL 34974		83		
			84 City	· FL	85 Zip Code
44 D	the previous of Sections 607 0503	2 and 607 1508 Florida Statutos	the above-named corn	oration submits this statement for the ournose of	changing its registered
i ii Pursuanti	to the provisions of Sections 607.0302	z anu our 1900, rionua Statutes,	, die apove-named corp		ntment as registered
l office or re	egistered agent, or both, in the State o	of Florida. Such change was autr	norized by the corporation	on's board of directors, i hereby accept the appoi	Indicate as registered
l office or re	egistered agent, or both, in the State on familiar with, and accept the obligation	of Florida. Such change was autr	norized by the corporation	on's board of directors. I hereby accept the appoi	nisheric as registered
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CITY-ST-ZIP 14. 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 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, with all other like empowered.