

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 14, 1999 8:00 am
Secretary of State

04-14-1999 90108 012 ***150.00

DOCUMENT # F96000005020

1. Corporation Name

STANLEY INDUSTRIES, INC. OF CALIFORNIA

Principal Place of Business

9265 NW 101 STREET
MEDLEY FL 33178

Mailing Address

9265 NW 101 STREET
MEDLEY FL 33178

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/01/1996

4. FEI Number

95-2998241

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 11305 N W 128 STREET
Suite, Apt. #, etc.

2a. Mailing Address

26 11305 N W 128 ST
Suite, Apt. #, etc.

City & State

23 MEDLEY FLORIDA

City & State

28 MEDLEY FLORIDA

Zip Country

24 33178 25 DADE

Zip Country

29 33178 30 DADE

9. Name and Address of Current Registered Agent

ALEXANDER, STEVEN
9265 NW 101 STREET
MEDLEY FL 33178

10. Name and Address of New Registered Agent

81 Name

ALEXANDER, STEVEN

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

11305 N W 128 STREET

83

84 City

MEDLEY

85 Zip Code

FL

33178

11. Pursuant to the provisions of Sections 607.0502 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

STEVEN ALEXANDER

4/1/99

DATE

12.

OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME PCD
STREET ADDRESS ALEXANDER, ROBERT
CITY-ST-ZIP 9265 NW 101 STREET
MEDLEY FL

TITLE ☐ DELETE
NAME VD
STREET ADDRESS ALEXANDER, JEROME
CITY-ST-ZIP 9265 NW 101 STREET
MEDLEY FL

TITLE ☐ DELETE
NAME SD
STREET ADDRESS ALEXANDER, STEVEN
CITY-ST-ZIP 9265 NW 101 STREET
MEDLEY FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PCD ☒ Change ☒ Addition
1.2 NAME ALEXANDER, ROBERT
1.3 STREET ADDRESS 11305 N W 128 ST
1.4 CITY-ST-ZIP MEDLEY FL 33178

2.1 TITLE VD ☒ Change ☒ Addition
2.2 NAME ALEXANDER, JEROME
2.3 STREET ADDRESS 11305 N W 128 ST
2.4 CITY-ST-ZIP MEDLEY FL 33178

3.1 TITLE SD - ALEXANDER, STEVEN ☒ Change ☒ Addition
3.2 NAME 11305 N W 128 ST
3.3 STREET ADDRESS MEDLEY FL 33178
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/7/99

305 885 6200

Date

Daytime Phone #

CR2E034 (11/98)