## 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** 

## DOCUMENT # G28123

ED WATTS PETROLEUM EQUIPMENT MAINTENANCE, INC.

Principal Plac	ce of Business	Mailing Address		_								
%EDWARD S. P.O. BOX 2413	WATTS. III	%EDWARD S. WATTS. III P.O. BOX 2413				•	~					
KEY WEST FL	KEY WEST FL 33045				DO NOT WRITE IN THIS SPACE							
ţ						3. Date Incorpora 03/16/1983						
2. Principal f	Place of Business	2a, Mailing Address		· · · · · · · · · · · · · · · · · · ·		4. FEI Number			·	Anni	lied For	
21		26				59-2269216	}		-	———	Applicable	
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.		_			-		\$8.		Iditional	
22		27			1 '	5. Certifcate of SI	atus Desired	X		ee Req		
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution				\$5.00 May Be Added to Fees		
Zip	Country	Žip	Count	try		8. This corporation	n owes the curr	ent year it	ntangible			
24	25	29	30			Personal Prope	erty Tax.		Ye:	s	□No	
	9. Name and Address of Curren	t Registered Agent				0. Name and Ad	dress of New F	Registered	Agent			
	ITS, EDWARD S., III	e Ne objekt total	L	81 Name 82 Street		7000						
,	3 DUCK AVE. APT. B211		ľ	Street	Address	(P.O. Box Numbe	r is Not Accepta	ablej				
, KEY	WEST FL 33040		8	B3		- 1 - 1 - 1	11,					
_			ا ا	B4 City			141 15 30 . 1		85	Zip Co	1,311,23.	
	*****					100		FI	<u> </u>			
office or i	to the provisions of Sections 607.050 registered agent, or both, in the State	of Florida. Such change was a	udborizod k	h. the com	oration's	board of directors	Lhereby accer	of the appo	ointment	as regis	etorod	
SIGNATURE	am familiar with, and accept the obligat	tions of, Section 607.0505, Flo	rida Statuti	es.				DATE	<del></del>	_		
K6 ∕*agent.i⊩a 	am familiar with, and accept the obligat	tions of, Section 607.0505, Flo	rida Statuti	es.		n reinstating)		DATE		CTOR		
KE / agent. Na	am familiar with, and accept the obligat	tions of, Section 607.0505, Flor t and title if applicable. (NOTE	rida Statute	9ent signature		on reinstating) ADDITIONS/CH	ANGES TO OF	DATE				
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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.

**FILED** 

Jan 22, 1999 8:00am

**Secretary of State** 01-22-1999 90064 045 \*\*\*158.75