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 20, 1999 8:00 am Secretary of State

04-20-1999 90011 030 ***150.00

A COMPANY MANUNCHAR AND AND MANUNCHAR MANUNCHAR

DOCUMEN 1. Corporation Name	T #	G686	36
SMITH-BINDER	INVE	STMENTS,	INC.

Principal Place of Business	Mailing Address						
17702 SIMMS RD ODESSA FL 33556-750 US	17702 SIMMS RD ODESSA FL 33556-750 US				DO NOT WRITE IN THE	S SPACE	
• ,					3. Date Incorporated or Qualifed 11/09/1983		
2. Principal Place of Business	2a. Mailing Address				4, FEI Number		Applied For
21	26		_		59-2340260		Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		,		5. Certificate of Status Desired		
City & State	City & State	-	•		6. Election Campaign Financing Trust Fund Contribution		
Zip Country 24 25	Zip	Cou 30	ntry	 	This corporation owes the current year In Personal Property Tax.		
9. Name and Address of Cur	rent Registered Agent				10. Name and Address of New Registered	Agent	
BINDER, HENRY J.			81	Name			
17702 SIMMS RD				Street Addre	ess (P.O. Box Number is Not Acceptable)		
ODESSA FL 33556-4750		59-2340260 Not Applicable bit. #, etc. 5. Certificate of Status Desired 6. Election Campaign Financing					
			84	City	FI	85	Zip Code
office or registered agent, or both, in the Sta	0502 and 607.1508, Florida State of Florida. Such change was	s authorized	i by t	-named corporation	pration submits this statement for the purpose on's board of directors. I hereby accept the appoint	f changin intment	ng its registered as registered

agent. I ar	m familiar with, and accept the obligations	of, Section 607.0505, Flori	da Statutes.			ĺ
SIGNATURE	Signature, typed or printed name of registered agent and t	itie if applicable. (NOTE: F	Registered Agent signature required	d when reinstating)	DATE	}
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	Р	[] DELETE	1.1 TITLE		☐ Change	Addition
NAME	SMITH, WILLIAM R.		1.2 NAME			
STREET ADDRESS	15819 SANCTUARY DRIVE		1.3 STREET ADDRESS			
CITY-ST-ZIP	TAMPA FL		1.4 CITY-ST-ZIP			
TITLE	ST	☐ DELETE	2.1 TITLE		Change	☐ Addition
NAME	BINDER, HENRY J.		2.2 NAME			. }
STREET ADDRESS	17702 SIMMS RD		2.3 STREET ADDRESS			
CITY-ST-ZIP	ODESSA FL 33556-4750		2.4 CITY-ST-ZIP			
TITLE		DELETE	3.1 TITLE		Change	Addition
NAME		•	3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		DELETE	4.1 TITLE		☐ Change	☐ Addition
NAME	•		4.2 NAME			Ì
STREET ADDRESS			4.3 STREET ADDRESS			ļ
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE		Change	☐ Addition
NAME			5.2 NAME			}
STREET ADORESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change	☐ Addition
NAME			6.2 NAME	•	•	
STREET ADDRESS		•	6.3 STREET ADDRESS			
CITY ST. 71D		•	6.4 CITY-ST-ZIP			

14. 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.

Henry J. Binder, Secy.—Treas.

920-6200