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

CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## **DOCUMENT # G95559**

1. Corporation Name

BOB'S MACHINE SHOP, INC.

Principal Place of Business	Mailing Address			ı Alanı Atalı Elsil Atalı albır lası		
% ROBERT O. ICENOGLE         % ROBERT O. ICENOGLE           1501 33RD STREET. S.E.         1501 33RD STREET. S.E.           RUSKIN FL 33570         RUSKIN FL 33570		DO NOT WRITE IN THIS SPACE				
		3. Date Incorporated or Qualifed 04/10/1984				
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For		
21	26		59-2412589	Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip Country		ountry	This corporation owes the current year li  Personal Property Tax.	ntangible ☐ Yes ☐ No		
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent			
ICENOGLE, ROBERT O. 1501 33RD STREET, SE RUSKIN FL 33570		81 Name 82 Street Add	dress (P.O. Box Number is Not Acceptable)			

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	Signature, typed or printed name of registered agent and title if it	spolicable. (NOTE: Re	gistered Agent signature re	equired when reinstating)	DAT		
12.			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			RS IN 12	
TITLE	Р	DELETE	1.1 TITLE			Change	Addition
NAME	ICENOGLE, ROBERT O.		1.2 NAME				
STREET ADDRESS	1501 33RD STREET, SE		1.3 STREET ADDRESS				
CITY-ST-ZIP	RUSKIN FL		1.4 CITY-ST-ZIP				
TITLE	ST	DELETE	2.1 TITLE			☐ Change	Addition
NAME	ICENOGLE, ROBERT LEE		2.2 NAME				
STREET ADDRESS	1501 33RD STREET, SE		2.3 STREET ADDRESS				
CITY-ST-ZIP	RUSKIN FL		2. 4 CITY-ST-ZIP				
⊸πle		☐ DELETE	-3.1 TITLE			_ Change	Addition
NAME		1	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				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP				
ππε		☐ DELETE	, 5.1 YITLE			☐ Change	☐ Addition
NAME	,		5.2 NAME		÷ -		
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP	·		5.4 C/TY-ST-Z/P	<u> </u>			
TITLE		DELETE	6.1 TITLE			Change	☐ Addition
NAME.			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-Z3P			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, on an attachment with an address, with all other like empowered.

SIGNATURE:

Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90200 042 \*\*\*150.00

Zip Code