

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Jul 09 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H59360 (8)

1. Corporation Name

FMA INTERNATIONAL, INC.

Principal Place of Business

120 W HYDE PARK PL
150
TAMPA FL 33606
US

Mailing Address

120 W HYDE PARK PL
150
TAMPA FL 33606
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/29/1985

4. FEI Number

59-2531787

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 or has paid the current year intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

DUNKEL, DAVID L.
120 W HYDE PRK PL, STE 150
TAMPA FL 33606

10. Name and Address of New Registered Agent

81 Name

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

800002583928

83

-07/09/98--01018--044

84 City

***550.00

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. TITLE CP ☐ DELETE

NAME DUNKEL, DAVID L.
STREET ADDRESS 120 W. HYDE PARK PLACE, SUITE 150
CITY-ST-ZIP TAMPA FL

13. TITLE D ☐ DELETE

NAME COCCHIARO, RICHARD
STREET ADDRESS 20 N. WACKER DR #1380
CITY-ST-ZIP CHICAGO IL 60606

14. TITLE DV ☐ DELETE

NAME SUTTER, HOWARD
STREET ADDRESS 500 W. CYPRESS CREEK RD. ST #200
CITY-ST-ZIP FT. LAUDERDALE FL 33309

15. TITLE DTV ☐ DELETE

NAME DOMINICI, PETER
STREET ADDRESS 120 W. HYDE PARK PLACE, SUITE 150
CITY-ST-ZIP TAMPA FL

16. TITLE DV ☐ DELETE

NAME SWARTZ, JAMES D
STREET ADDRESS 120 W. HYDE PARK PLACE, SUITE 150
CITY-ST-ZIP TAMPA FL 33606

17. TITLE S ☐ DELETE

NAME CALCATERRA, THOMAS
STREET ADDRESS 120 W. HYDE PARK PLACE, SUITE 150
CITY-ST-ZIP TAMPA FL 33606

1.1 TITLE C ☒ Change ☐ Addition

1.2 NAME DUNKEL, DAVID L.
1.3 STREET ADDRESS 120 W. HYDE PARK PLACE, SUITE 150
1.4 CITY-ST-ZIP TAMPA, FL 33606

2.1 TITLE DV ☒ Change ☐ Addition

2.2 NAME COCCHIARO, RICHARD
2.3 STREET ADDRESS 1519 EDGEWOOD LANE
2.4 CITY-ST-ZIP WINNETKA, IL 60093

3.1 TITLE DV ☒ Change ☐ Addition

3.2 NAME SUTTER, HOWARD
3.3 STREET ADDRESS 12566 CLASSIC DRIVE
3.4 CITY-ST-ZIP CORAL SPRINGS, FL 33071

4.1 TITLE DP ☒ Change ☐ Addition

4.2 NAME JAMES D. SWARTZ
4.3 STREET ADDRESS 120 W. HYDE PARK PLACE, SUITE 150
4.4 CITY-ST-ZIP TAMPA, FL 33606

5.1 TITLE D ☐ Change ☒ Addition

5.2 NAME GORDON TUNSTALL
5.3 STREET ADDRESS 120 W. HYDE PARK PLACE, SUITE 150
5.4 CITY-ST-ZIP TAMPA, FL 33606

6.1 TITLE D ☐ Change ☒ Addition

6.2 NAME WILLIAM R. CAREY, JR.
6.3 STREET ADDRESS 120 W. HYDE PARK PLACE, SUITE 150
6.4 CITY-ST-ZIP TAMPA, FL 33606

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.

SIGNATURE:

7/6/98 (813) 258-8855

CR2E034 (5/98)