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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H62206

(8)

NELCO INTERNATIONAL, INC.

FILED May 15 1998 8:00am Secretary of State

DO NOT WRITE IN THIS SPACE

Principal Place of Business		Mailing Address			t 1864firt Bill Britis tiffet aftit Britis Bill Statt Brati Brati Brati Brati Brati inn einer inne			
339 ETH AVE		339 6TH AVENUE WEST			,			
BRADENTON	PL 3420	BRADENTON FL	PPZUD		DO NO	T WRITE IN THIS	SPACE	
					3. Date Incorporated or Q	rualified		
					06/11/1985			
2. Principal P	lace of Business	2a. Mailing Addre	ss		4. FEI Number		Aı	optied For
21		26	26		59-2552462		Not Applicab	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status De	sicod [7	\$8.75 Additional	
2		27			b. Certificate of Status De	21160 🗖	Fee R	equired
City & Stat	e	City & State			6. Election Campaign Fina	ancing	\$5.00	May Be
3		28			Trust Fund Contribution	<u> </u>	Added	to Fees
Zip	Country	Zip	Co	ountry	8. This corporation owes			
4	25	29	30		Personal Property Tax			No
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of	New Registered	Agent	
DO	rris, virginia a.			81 Name				
	6TH AVENUE WEST			82 Street Add	ress (P.O. Box Number is Not	Acceptable)		
	ADENTON FL 34205			000	(101 101			
				83				
				84 City			BE 7in	Code
	to the provisions of Sections 607 055 egistered agent, or both, in the State of familiar with, and accept the oblig			1 -1,		FL	. '	
12.	Signature, typed or printed names of represent as OFFICERS AN	ID DIFFECTORS	13	ed Agent signature requ	ADDITIONS/CHANGES	DATE TO OFFICERS AND		
12.	OFFICERS AN				ADDITIONS/CHANGES	TO OFFICERS AND	DIRECTOR Change	
IITLE	P POPOS SEPONES A	☐ DE	•	TITLE			L'I cusufic	Additi
NAME	DORRIS, VIRGINIA A.			NAME				
STREET ADDRESS	339 6TH AVENUE WEST			STREET ADDRESS				
CITY-ST-ZIP	BRADENTON FL 34205	DEL		CITY-ST-ZIP			Change	Additi
TITLE	PODDIC BITTLE		_	TITLE			□ Culange	
NAME	DORRIS, RUTH			NAME				
STREET ADDRESS	339 6TH AVE WEST			STREET ADDRESS				
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NAME				NAME				
STREET ADDRESS			6.3	STREET ADDRESS				
CITY-ST-ZIP			64	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), Fiorida 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.

4/30/98

841-745-1836