May 08, 1999 8:00 am Secretary of State

05-08-1999 90077 044 ***150.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **H68638**

Corporation Name

ALPINE I	INDUSTRIES CORPORATION	ON				
Principal Place	e of Business	Mailing Address	Mailing Address		T INDICALI ONLY ONLY ONLY BAIOR LIVER INTO ANALY BAILS OFFICE &:	JAN DION BABAH IDDI
2908 29TH AVENUE EAST BRADENTON FL 34208		2908 29TH AVENUE EAST BRADENTON FL 34208			DO NOT WRITE IN THIS SPACE	
					3, Date Incorporated or Qualifed 07/30/1985	
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address		4, FEI Number	Applied For
21		26	26		59-2588659	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		E Cortifecto of Status Desired	5 Additional Required
City & State 23		City & State	City & State			00 May Be ed to Fees
Zip	Country	Zip	Count	у	8. This corporation owes the current year Intangible	
24	25	29 3	0		Personal Property Tax. Yes	□No
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Registered Agent	
VOGLER II, EDWARD 802-11TH STREET WEST BRADENTON FL 33505			82 Street Address (P.O. Box Number is Not Acceptable) 83			
			8	4 City	FL 85 Z	ip Code
office or r	egistered agent, or both, in the Sta	502 and 607.1508, Florida Statutes te of Florida. Such change was aut gations of, Section 607.0505, Florid	horized b	v the corpor	corporation submits this statement for the purpose of changing ration's board of directors. I hereby accept the appointment as	its registered registered
SIGNATURE		(NOTE: D	anistand Ac	Ant signature re-	quired when reinstating) DATE	
SIgnature, typed or printed name of registered agent and title if applicable. (NOTE: Re 12. OFFICERS AND DIRECTORS			13.	ent signature rec	ADDITIONS/CHANGES TO OFFICERS AND DIREC	TORS IN 12
TITLE	P DELETE		1,1 TITLE		Chan	
NAME	BROEMEL, HANS	 IS		_		
STREET ADDRESS	CAAC TIMED AND AND		1.2 NAME 1.3 STREET ADDRESS			Ì
CADACOTA EL		1,4 CITY-ST-ZIP			j	
CITY-ST-ZIP TITLE	S DELETE		2.1 TITLE		☐ Chan	ge Addition
NAME	BROEMEL, MONICA		2.2 NAM			- —
STREET ADDRESS	8118 TIMBER LAKE LANE		I -	ET ADDRESS		
	SARASOTA FL		2.4 CITY			
CITY-ST-ZIP	UNINOVIA I L		■ Z. 4 UHY	-01-415		

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 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.

3.1 TITLE

3.2 NAME

4.1 TITLE

4, 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

3 3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4,4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS CITY-ST-ZiP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ DELETE

☐ DELETE

□ DELETE

☐ DELETE

04-30-99

941-749-1900

Navtime Phone #

☐ Change

Change

☐ Change

R2F034 (11/98)

Addition

Addition

Addition

☐ Addition

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