FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # J13612 1. Corporation Name

(3)

ı	ANF	DIDING	AND	EQUIPMENT	COMPANY
L	.MINE	FIFING	MINIT	CULIFORNI	LAUNCANI

Principal Place of Business Mailing Address									-	HE HIEF GIBIL DIE						
% John A. Lane 2500 East Main Lakeland Fl. 33801						% John A. Lane 2500 East Main Lakeland Fl 33801						· · · · · · · · · · · · · · · · · · ·				
												3. Date Incorporated or Qualified				
2. 21	, Principal Place of Business					2a. Mailing Address						4. FEI Number 59-2682057			Applied For	
[21]	Suite, Apt. #, etc.				20	Suite, Apl. #, etc.						\$8.7	Not Applicable 5 Additional			
22]				27	27					5. Certificate of Status Desired			Required		
23	City & State				21	City & State			Election Campaign Financing Trust Fund Contribution Added to Fees							
	Zip Country			···	Zip Country				B. This corporation has liability for intangible tax under s 199.032,							
24				29			30				Florida Statutes					
		g Name	and A	ddress of Cu	rrent Reg	istered A	gent		81	T	Jama	10. Name and Address of New	Registered	Agent		
	LANE, JO	A NHC														
	2500 EAS								82		Street Addre	eet Address (P.O. Box Number is Not Acceptable)				
	LAKELAN	ID FL 3381	01						83	1				_		
									84	7	City		-	85 2	Zip Code	
11	L. Porsuant te	o the provisi	ons of	Sections 607.0)502 and	607 1508	Florida Statu	ites the	ahove.	nan	ned cornors	tion submits this statement for the p	TL	anoino ite	registered office	
	or registere	ea agent, or	both,	n the State of F obligations of, S	Horida, Su	ich change	e was authori	ized by i	the corp	ora	ition's board	of directors. I hereby accept the ap	pointment as	s registere	d agent. I am	
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	14 - \$1-719 14 - \$1-719							- 1	6 3 STREF 6 4 CITY-1							
		ı y certify that	the in	ormation suppli	ied with tr	nis filing is	voluntarily fur					r the exemption stated in Section 11	9.07(3)(k), Fl	orida Stati	utes. 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 Brock 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: John A. LANE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/24/96 941 6663877