FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **J33784** **(6)**

1. Corporation Name

FLORIDA INDUSTRIAL FILTERS, INC.

Principal Place of Business	Mailing Address
1367 HIGHLAND AVE. DUNEDIN FL 34698	1367 HIGHLAND AVE. DUNEDIN FL 34698

3. Date Incorporated or Qualified: **09/16/1986**
3a. Date of Last Report: **03/31/1995**

4. FEI Number: **59-2722381** ☐ 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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 Scarlet Blvd.	26 Scarlet Blvd.
Suite, Apt. #, etc. 22 305-B	Suite, Apt. #, etc. 27 305-B
City & State 23 Oldsmar FL	City & State 28 Oldsmar FL
Zip / Country 24 34677 / 25 USA	Zip / Country 29 34677 / 30 USA

9. Name and Address of Current Registered Agent

HICKMAN, HIRAM P.
347 BAILEY COURT
PALM HARBOR FL 34684

10. Name and Address of New Registered Agent

81 Name: Hickman, Hiram P.
82 Street Address (P.O. Box Number is Not Acceptable): 347 Bailey Court
83
84 City: Palm Harbor **FL** 85 Zip Code: 34684

11. Pursuant to the provisions of Section 607.0505 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: Hiram P. Hickman 4/3/96
Signature of Officer or Director Authorizing Change — Date

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PT HICKMAN, HIRAM P. 347 BAILEY COURT PALM HARBOR FL	☐ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S HEWETSON, DEBRA 1137 BASS BLVD. DUNEDIN FL	☐ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	☒ Change ☐ Addition S Hewetson, Debra 1180 Starboard Way Clearwater, FL 34615
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is true, and I have not quoted 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 above, or on an attachment with an address.

SIGNATURE: Hiram P. Hickman 4/1/96 813/855-4700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone

CR2E034 (12/95)