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PROFIT CCRPORATION ANNUAL REPORT 1999

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1. Corporat on Name



J92271

FLORIDA DEPARTMENT OF STATE

Kather ne Harris

Secretary of State DIVISION OF CORPORATIONS

Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90186 027 ***150.00

ETAM INDUSTRIES, INC.	
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Mailing Address Principal Place of Business 406 COMMERCE WAY 406 COMMERCE WAY JUPITER FL (3458) JUPITER FL 33458 DO NOT WRITE IN THIS SPACE US 3. Date Incorporated or Qualifed 09/15/1987 2a. Mailing Address 4. FEI Number Appled For 2. Principal Place of Business Not Applicable 26 59-2844782 \$8.75 Additional Suite, Apt. #, etc. Suite, Art. #, etc. 5. Certifcate of Status Desired Fee Required 22 27 City & State \$5.00 May Be City & State 6. Electior Campaign Financing Added to Fees Trust Fund Contribution 23 28 Zip Zip Country Country 8. This corporation owes the current year Intangible []No Personal Property Tax. 25 30 24 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 STEEVES, RICHARD W 82 Street Address (P.O. Box Number is Not Acceptable) 406 COMMERCE WAY JUPITER FL 33458 83 85 Zip Ccde 84 City FI. 11. Pursuar t 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 registered agent, or both, in the State of Florida. Such change was authorized by the corpora ion'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. SIGNATURI: Signature, typed or printed nan e of registered agent ϵ nd title if applicable (NOTE Registered Agent signature requi ed when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Addition Change DELETE 1.1 TITLE TITLE STEEVES, RICHARD W. 12 NAME NAME STREET ADDRESS 22 CAMBRIA RD WEST 1.3 STREET ADDRESS PALM BCH GARDENS FL 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE TITLE 2.1 TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ DELETE 31 TITLE TITLE 3.2 NAME 33 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change DELETE 41 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4 4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Change Addition □ DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

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 changes, or of an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

CR2E034 (11/98