

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

FILED  
May 10, 1999 8:00 am  
Secretary of State

05-10-1999 90123 025 \*\*\*150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # K13315

1. Corporation Name  
CONDOR CUTTING, INCORPORATED



DO NOT WRITE IN THIS SPACE

Principal Place of Business: % MICHAEL CONKLIN, 208 ELLIOT AVENUE, SARASOTA FL 34232  
Mailing Address: % MICHAEL CONKLIN, 208 ELLIOT AVENUE, SARASOTA FL 34232

3. Date Incorporated or Qualified: 01/29/1988

2. Principal Place of Business (21) 2a. Mailing Address (26)

4. FEI Number: 65-0034417 Applied For: Not Applicable

Suite, Apt. #, etc. (22) Suite, Apt. #, etc. (27)

5. Certificate of Status Desired: \$8.75 Additional Fee Required

City & State (23) City & State (28)

6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

Zip (24) Country (25) Zip (29) Country (30)

8. This corporation owes the current year Intangible Personal Property Tax: Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CONKLIN, MICHAEL  
208 ELLIOT AVENUE  
SARASOTA FL 34232

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

11. Pursuant 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 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 (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Table with 6 rows for officers and directors, including fields for Title, Name, Street Address, and City-ST-ZIP. Includes a 'DELETE' checkbox for each row.

Table with 6 rows for additions/changes to officers and directors, including fields for Title, Name, Street Address, and City-ST-ZIP. Includes checkboxes for 'Change' and 'Addition' for each row.

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] 4-28-99 (941) 378-2386  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/98)