

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # K36715 (6)

1. Corporation Name

STEMAR MACHINE COMPANY, INC.



Principal Place of Business

% STEVE HUSZAR
15460 AVIATION LOOP DRIVE
BROOKSVILLE FL 34609

Mailing Address

% STEVE HUSZAR
15460 AVIATION LOOP DRIVE
BROOKSVILLE FL 34609

3. Date Incorporated or Qualified
09/27/1988

3a. Date of Last Report
04/04/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-2922468

Applied For
Not Applicable

22

27

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

23

28

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

24

29

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HUSZAR, STEVE
15460 AVIATION LOOP DRIVE
BROOKSVILLE FL 34609

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 replacing)

DATE

12. OFFICERS AND DIRECTORS

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1. TITLE	1.1 TITLE ☐ Change ☐ Addition
2. NAME	2.1 NAME
3. STREET ADDRESS	3.1 STREET ADDRESS
4. CITY, ST, ZIP	4.1 CITY, ST, ZIP
5. TITLE	5.1 TITLE ☐ Change ☐ Addition
6. NAME	6.1 NAME
7. STREET ADDRESS	7.1 STREET ADDRESS
8. CITY, ST, ZIP	8.1 CITY, ST, ZIP
9. TITLE	9.1 TITLE ☐ Change ☐ Addition
10. NAME	10.1 NAME
11. STREET ADDRESS	11.1 STREET ADDRESS
12. CITY, ST, ZIP	12.1 CITY, ST, ZIP
13. TITLE	13.1 TITLE ☐ Change ☐ Addition
14. NAME	14.1 NAME
15. STREET ADDRESS	15.1 STREET ADDRESS
16. CITY, ST, ZIP	16.1 CITY, ST, ZIP
17. TITLE	17.1 TITLE ☐ Change ☐ Addition
18. NAME	18.1 NAME
19. STREET ADDRESS	19.1 STREET ADDRESS
20. CITY, ST, ZIP	20.1 CITY, ST, ZIP

D
HUSZAR, STEVE
1158 CHANNINGS AVE.
SPRING HILL FL

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Signature

CR2E034 (12/95)