FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 4

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 **DOCUMENT # K37320**

1. Corporation Name

LASER MAINTENANCE SUPPLY, INC.

District Management of State o	Mailing Address				
Principal Place of Business 2420 N.W. 16TH LANE POMPANO BEACH FL 33064	2420 N.W. 16TH LANE POMPANO BEACH FL 3:064				
2. Princip al Place of Business	2a, Mailing Address				
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.				

Apr 28, 1999 8:00 am Secretary of State

04-28-1999 90007 012 ***150.00



2420 N.W. 16TH POMPANO BEA		2420 N.W. 16TH LANE POMPANO BEACH FL 3(064			DO NOT WRITE IN	Γ⊣IS S	SPACE			
						3. Date incorporated or Qualifed 10/07/1988				
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number			Apr	olied For
21		26				59-1941879			Not	Applicable
Suite, /\pt.	#, etc.	Suite, Apt. #, etc.	_			5. Certificate of Status Desired		•		dditional quired
City & State	e	City & State				6. Election Campaign Financing Trust Fund Contribution				May Be Fees
Zip	Country	Zip 29	¬ '			This corporation owes the current year Personal Property Tax.	ar Inta	ngible □ Yes		□No
	9. Name and Address of Curr	rent Registered Agent				10. Name and Address of New Register	rad A	gent		
			8	B1	Name					
SADER, ROBERT 1901 W CYPRESS CREEK RD			8	82	Street Aid	ress (P.O. Box Number is Not Acceptable)				
STE	415		[B3						
	LAUDERDALE FL 33309		_	_ _						
i			1	84	City		FΊ	85	Zip C	ode
office or r	to the provisions of Sections 607.0 egistered agent, or both, in the Stammamiliar with, and a scept the oblination of the section of the sect	ite of Florida. Such change was at igations of, Section 607.0505, Flor	ithorized t ida Statut	by tr les.	ne corporati	poration subm is this statement for the purposion's board of directors. I hereby accept the a	ib ioin	hangin tment a	gits ∋sreç	registered istered
		ANI) DIRECTORS	13.	yen:	signature red int	ADDITIONS/CHANGES TO OFFICER		O DIRE	CTO	2S IN 12
12.		DELETE	1.1 TITU	c		ADDITIONS/CHANGES TO OFFICER	S 4141	☐ Cha		Addition
TITLE	PRES	CI DECEIL			}					
NAME	SHELDON FREISTAT		12 NAM							
STREET ADORESS	2420 NW 16TH LANE				ADDRESS					
CITY-ST-ZIP	POMPANO BEACH FL		1.4 CITY		ZIP			□ Chr		☐ Addition
TITLE		☐ DELETE	2.1 TITL		İ			☐ Cha	inge	
NAME			2.2 NAM	ME.	1					
STREET ADDRESS			2.3 STR	EETA	ADDRESS					
CITY-ST-ZIP			2.4 CIT	Y-ST-	- ZIP					·- -
TITLE		☐ DELETE	3.1 TITL	3,				☐ Cha	inge	Addition
NAME			3 2 NAM	Æ						
STREET ADDRE 3S			3.3 STR	EETA	ADDRESS					
CITY-ST-ZIP			3.4. CIT	Y-ST-	-ZIP					- <u>-</u>
TITLE		☐ DELETE	4.1 TITU	E				Cha	ınge	☐ Addition
NAME			4. 2 NAM	ME	1					
STREET ADDRE 3S			4.3 STR	EETA	ADDRESS					
CITY-ST-ZIP			4.4 CITY	Y-ST-	ZIP					
TITLE	<u> </u>	☐ DELETE	5.1 TITL	£				☐ Cha	inge	☐ Addition
NAME			5.2 NAM	Æ	ļ					
STREET ADDRESS			5.3 STR	EETA	ADDRESS					
CITY-ST-ZIP			5.4 CITY	/-ST-	ZIP					
TITLE		DELETE	6.1 TITL	.E				☐ Cha	inge	Addition
NAME			6 2 NAM	Æ						
		•.	,		ADDRESS					
STREET ADDRE: S		1	6.4 CITY							
CITY-ST-ZIP	i 4 \	1,	0.4 (1) 1		CIL					1

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 of 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 of 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 of 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 of 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 of 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 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 of t

SIGNATURE:

Sheldon Freistat SIGNATURE AND TYPED OR PRIM