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PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # 1. Corporation Name

(9)

TROPICAL	TOOL	SHARPFNING	INC.

· · · · · · · · · · · · · · · · · · ·								
Principal Place of Business 1408 S.W. 15TH AVE. OCALA FL 34474 US		Mailing Address 1408 S.W. 15TH AVE. OCALA FL 34474 US						
		U			3. Date incorporated or Qualified 01/12/1990		of Last F 4/03/19	
2. Principal Pla	ice of Business	2a. Mailing Address			4. FEI Number		├ ~~	Applied For
F∤ Suite, Apt. #	r oto	Suita Apt # ota			59-2997948	······································		Not Applicable
2	r, Gic.	Suite, Apt. #, etc.			5. Certificate of Status Desired			5 Additional Required
City & State		City & State			6. Election Campaign Financing		\$5.0	May Be
3} - Zip	Country	28	Country		Trust Fund Contribution			d to Fees
1	Country 25	Zip [29]	Country 30		8. This corporation has liability for Florida Statutes Yes	intangible ta 	w under s	199.032,
	9. Name and Address of Curre	- · - 			10. Name and Address of New R		Agent	
			81 Na	me				
	MARY-HELEN		82 St	eet Addres	ss (P.O. Box Number is Not Acceptab	ole)		
	V 97TH PLACE							
UUALA	FL 34476		83					
			84 Cr	ty			85 Z	ip Code
11. Pursuant to	the provisions of Sections 607,050	02 and 607 1508. Florida Statu	tes, the above-name	ad corporat	tion submits this statement for the pur of directors. I hereby accept the app	roose of cha	enging its	registered offi
COLUMN TARGET								
	Strature, type for printed name strogisteral age OFFICERS AN	ND DIRECTORS	OTE: Registered Agent sign	ature required v	Men reinstating: ADDITIONS/CHANGES TO OFF	DATE	DIRECTO	DRS IN 12
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SIGNATURE:

SIGNATURE TYPE OF PHINTED NAME OF SIGNING OFFICER OF DIRECTOR

29/96 352.368-7900