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Secretary of State

03-03-1999 90034 024 ***150.00

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PROFIT CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # M51286

1. Corporation Name
ACTION, SPRAY-ON SYSTEMS, CO.

Principal Place of Business

1225 BENNETT DRIVE
SUITE 140
LONGWOOD FL 32750
US

Mailing Address

477 COUNTRY CLUB DRIVE
LONGWOOD FL 32750
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/30/1987

4. FEI Number

59-2802780

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing

\$5.00 May Be Added to Fees

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

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 8985 S. A1A

27 Suite, Apt. #, etc.

28 City & State

MELBOURNE Bch, FL

29 Zip

32951

30 Country

USA

9. Name and Address of Current Registered Agent

MOWRY, ROBERT
477 COUNTRY CLUB DRIVE
LONGWOOD FL 32750

10. Name and Address of New Registered Agent

81 Name

ROBERT MOWRY

82 Street Address (P.O. Box Number is Not Acceptable)

8985 S. A1A

83

84 City

MELBOURNE Beach

85 State

FL

86 Zip Code

32951

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

Robert Mowry Sec

(NOTE: Registered Agent signature required when reinstating)

ROBERT MOWRY 2-9-99

DATE

12. OFFICERS AND DIRECTORS

TITLE DELETE

D
NAME LUCA, THERESA
STREET ADDRESS 477 COUNTRY CLUB DRIVE
CITY-ST-ZIP LONGWOOD FL 32750

TITLE DELETE

D
NAME MOWRY, ROBERT
STREET ADDRESS 477 COUNTRY CLUB DRIVE
CITY-ST-ZIP LONGWOOD FL 32750

TITLE DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

D
1.2 NAME THERESA LUCA
1.3 STREET ADDRESS 8985 S. A1A
1.4 CITY-ST-ZIP MELBOURNE Bch FL 32951

2.1 TITLE Change Addition

D
2.2 NAME ROBERT MOWRY
2.3 STREET ADDRESS 8985 S. A1A
2.4 CITY-ST-ZIP MELBOURNE Bch. FL 32951

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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:

Robert Mowry Sec ROBERT MOWRY

Date

2-9-99 407-831-2931

Daytime Phone #

CR2E034 (11/98)