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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUN 1. Corporation		058 (9)					
E & E	SMALL ENGINE SALES	AND SERVICE, INC.					
Principal Place of Business Mailing Address					I IMBIANATI SAN BILISA MBAH MAHAN MILAN	. 1816 41811 61811 61816 6181	
	Mosassa trail A SPGS. Fl 34448		8030 W. HOMOSASSA TRAIL HOMOSASSA SPRINGS FL 34448 US		3. Date Incorporated or Qualified	3a. Date of Last Re	egort
					02/22/1988	02/21/19	•
2. Principal Pla	ce of Business	2a. Mailing Address			4. fEl Number		Applied For
1		26			59-2888446		Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired	1 1	Additional Required
City & State			City & State		6. Election Campaign Financing	\$5.00	May Be
3		28			Trust Fund Contribution	1 1	to Fees
Zip	Country	Zιρ	Country	,	B. This corporation has liability for in		199.032,
4	25	29]	30		Florida Statutes X Yes 10. Name and Address of New Re		
	9. Name and Address of Curr	ent Registered Agent	81	Name ,		Ristaten Whent	
				William I. Zigiar			
	EWS, BENITA P.		82	Street Add	ress (P.O. Box Number is Not Acceptable 11360 Grybek Drive	0]	
	V. SPRING COVE ROAD		83	T			
HOMO	SASSA SPRINGS FL 34448				Homosassa Springs, Fl		p Code
			84	í '		FLI	
SIGNATURE 2	Signature, typed or prinled name of registered as	nent na military is a visitable (NO) ND DRECTORS	will	1.	oration submits this statement for the purp and of directors. Thereby accept the appoint contaction of the ADDITIONS/CHANGES TO OFFIC	DERS AND DIRECTO	10 DRS IN 12
TITLE	D	D DELETE				Change	Addition
NAME	ZIGLAR, WILLIAM T.		1.2 NAME 1.3 STREET ADDRESS 1.4 GFY-S1-ZIP				
STHEET ADDRESS	11360 GRYBEK DRIVE						
CITY - ST - ZIP	HOMOSASSA SPGS. FL	V nelete		S1-7P		Change	Addition
TITLE NAME	MATTHEWS, BENITA P.		2 1 THLE 22 NAME 23 STREFT ADDRESS				
STREET ADDRESS							
CITY - ST- ZIP	HOMOSASSA SPGS. FL	re nonu	2.4 CITY	4			
IIILE		DELETE				☐ Change	☐ Addit₊on
NAME			3.2 NAME				
STREET ADDRESS			3.3 STRE	FLADORESS			
CITY - ST - ZIP			3 4 C-TY-				☐ Addition
THILE	☐ DELETE		4. 1 TITLE			☐ Change	■ Addition
NAME			4.2 NAME				
STREET ADDRESS			4 3 S1RFF	T ADDRESS			
CITY-ST-ZIP TITLE		DELETE				Change	Addition
NAME			5 1 TITLE 52 NAME				
STREET ADDRESS				LADDRESS			
CITY-ST-7IP			5 4 CITY -				
TITLE	DELETE		6 1 THEF]		Change	☐ Addition
NAMÉ			6.2 NAMi				
STREET ADDRESS				-T ADURESS			
CITY - ST - ZIP			6.4 CITY -	\$1-70°	for the exemption stated in Section 119.0	500 A S F 1	too I further

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not quality for the exemption stated in Section 119.07(3)(k). Honda Statutes: Trumber 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 comporation 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:

SIGNATURE AND TYPED OR PRINTED NAME OF FIGURE OF DIRECTOR