

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 JUN 22 AM 4:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M75242

1. Corporation Name

ENGINEERING LUBRICATION CONSULTANTS INC.

M75242-1

Principal Place of Business

Mailing Address

707 KNOXWOOD DRIVE
LARGO, FL. 34640

SAME

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
APR. 15, 1988	1994
4. FEI Number	Applied For
59-2897937	Not Applicable
5. Certificate of Status Desired	☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	☐ \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes	☒ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 LARGO, FL	26 707 Knoxwood Dr. 34640
Suite, Apt., etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip	Country
24	25
Zip	Country
29	30

9. Name and Address of Current Registered Agent

STEVEN H. MEZER RA
1212 COURT ST. SUITE B
CLEARWATER, FL. 34616

10. Name and Address of New Registered Agent

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 607.0506, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	11 TITLE	☐ Change	☐ Addition
NAME	12 NAME		
STREET ADDRESS	13 STREET ADDRESS		
CITY, ST, ZIP	14 CITY, ST, ZIP		
TITLE	21 TITLE	☐ Change	☐ Addition
NAME	22 NAME		
STREET ADDRESS	23 STREET ADDRESS		
CITY, ST, ZIP	24 CITY, ST, ZIP		
TITLE	31 TITLE	☐ Change	☐ Addition
NAME	32 NAME		
STREET ADDRESS	33 STREET ADDRESS		
CITY, ST, ZIP	34 CITY, ST, ZIP		
TITLE	41 TITLE	☐ Change	☐ Addition
NAME	42 NAME		
STREET ADDRESS	43 STREET ADDRESS		
CITY, ST, ZIP	44 CITY, ST, ZIP		
TITLE	51 TITLE	☐ Change	☐ Addition
NAME	52 NAME		
STREET ADDRESS	53 STREET ADDRESS		
CITY, ST, ZIP	54 CITY, ST, ZIP		
TITLE	61 TITLE	☐ Change	☐ Addition
NAME	62 NAME		
STREET ADDRESS	63 STREET ADDRESS		
CITY, ST, ZIP	64 CITY, ST, ZIP		

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: Otto J. Licht OTTO F. LIGHT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/14/95 (813) 522-9323

Date

Telephone